



HINGHAM LITTLE LEAGUE SUMMER BASEBALL \$99 PER PLAYER

Hingham Little League, Inc.
P.O. Box 569
Hingham, MA 02043

2010 Player Registration Form

Player's Name _____ League Age ____ Birthdate _____

Home Address _____ Home Phone _____

Father's Name _____ Cell Phone # _____

Email Address _____

Mother's Name _____ Cell Phone # _____

Email Address _____

Interested in coaching ___ Yes ___ No

Emergency Contact _____ Phone # _____

Medical Comments _____

1. I/we the parents/guardians of the above named candidate for a position on a Little League Summer baseball team, hereby give my/our approval to participate in any and all Little League activities, including transportation to and from the activities.
2. I/We know that participation in baseball or softball may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless the local Little League, Little League Baseball, Incorporated, the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.
3. I/We agree that our child (candidate) may be required to try out for a team.
4. I/We will furnish a certified birth certificate of the above-named candidate to League Officials.

Parent/Guardian _____ Date _____

Registration fee: \$99.00

**Please make check payable to Hingham Little League
and mail with registration form to the address above.**

