

# SPRING 2022 REGISTRATION OF EN



## **HOW TO REGISTER\***

SIMPLY SCAN THIS CODE WITH YOUR PHONE



IN PERSON DICK'S SPORTING GOODS - SATURDAY, JANUARY 23rd & SATURDAY, FEBRUARY 12th FROM 9am -1pm Online www.mhcll.org

BY MAIL MHCLL, P.O. BOX 655, MOREHEAD CITY, NC 28557

#### COSTS

\$40 FOR TEE BALL AND JUNIOR ROOKIES \$60 FOR ROOKIES, MINOR LEAGUE AND MAJOR LEAGUE \* ASSISTANCE WITH REGISTRATION COSTS IS AVAILABLE



## **IMPORTANT DATES AND INFO**

THIS YEAR MHCLL WILL BE CHARTERING AN INTERMEDIATE 11-13 DIVISION AS OUR MAJOR DIVISION ROOKIE, MINOR AND MAJOR LEAGUE ASSESSMENTS/TRYOUTS FOR PLAYERS AGES 7-13 YEARS OLD\* WHEN SUNDAY, FEBRUARY 6TH AND SUNDAY, FEBRUARY 13TH TIMES TBA

\*ALL PLAYERS OF ALL AGES NOT ALREADY DRAFTED ON A MAJORS TEAM ARE REQUIRED TO ATTEND

**WHERE** SWINSON PARK, MOREHEAD CITY

MAJOR LEAGUE DRAFT HELD ON FEBRUARY 16TH

#### **OPENING CEREMONY**

WHEN SATURDAY, MARCH 19th. (TIME TO BE DETERMINED) WHERE SWINSON PARK, MOREHEAD CITY

SKILLS CLINICS FOR T-BALL AND JR ROOKIES 1/9/22, 1/27/22 & 2/27/22 LIKE & FOLLOW US ON FACEBOOK TO STAY UP TO DATE WITH EVENTS.

\*SKILLS CLINICS ARE OPTIONAL. REGISTRATION WITH MHCLL IS REQUIRED. ADDITIONAL DATES AND LOCATIONS TO BE ANNOUNCED!

## WANT TO VOLUNTEER? VOLUNTEERS NEEDED AND WELCOME! POSITIONS AVAILABLE TO COACH, WORK CONCESSIONS, ETC.

**QUESTIONS? EMAIL US: PLAYBALL@MHCLL.ORG OR** 

CONTACT: CHUCK LINDNER, EMAIL: CAPTFRITZ@EMBARQMAIL.COM, PHONE: 252-241-2000 RYAN WILLIAMS, EMAIL: THE1RYANWILLIAMS@GMAIL.COM, PHONE: 252-635-8778

WE LOOK FORWARD TO SEEING EVERYONE AT SWINSON PARK FOR MHCLL'S 67TH YEAR!





FOLLOW US @MOREHEAD CITY LITTLE LEAGUE

#### Little League® Player Registration Form



I am registering my child for (pick one): ☐Tee Ba	all (4-5 yrs)
Address:	Gender: Male □ Female □
Address 2 (if applicable):	League Age: League Fee:
City:	State: Zip Code:
Phone:	Email:
Shirt Size: Youth: $\square XS \square S \square M$	$\Box$ L Adult: $\Box$ S $\Box$ M $\Box$ L $\Box$ XL
Parent/Guardian Information	
Parent/Guardian #1	Parent/Guardian #2
Name:	Name:
Phone:	Phone:
Email:	Email:
Occupation:	Occupation:
Volunteer? $\square$ Yes $\square$ No If yes, fill out "Volunteer Application"	Volunteer? ☐ Yes ☐ No If yes, fill out "Volunteer Application"
Medical Information	
Emergency contact:	Insurance carrier:
Relationship to player:	Phone:
Phone:	Policy:
Media Consent and Release for Minors	
, (print full name of parent/gua "My Child"). I acknowledge that signature of this form hereby grants b pictures, digital images and/or videos of My Child, or in which My Chi	ardian), am the parent/guardian of
activities.  (2) I/We know that participation in baseball or softball may result in serious injuries and	League team, hereby give my/our approval to participate in any and all Little League activities, including transportation to and from the d protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold ponsors, 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 or regulgence or for any other cause.

  If applicable, I/We agree to return upon request the uniform and other equipment issued to my/our child in as good conditions as when received except for normal wear and tear.

  I/We agree to provide proof of legal residence or school enrollment (as defined by Little League Baseball, Incorporated at LittleLeague.org/residence) and age. I/We understand that our child (candidate) must be eligible under the residence/school attendance and age regulations of Little League Baseball, Incorporated, to participate in this Local League, and that if any controversy arises regarding residence/school attendance and/or age, the decision of the Little League International Charter Committee in Williamsport, Pennsylvania shall be final and binding. I/We further understand that if any participant on a Little League team does not qualify for participation in the league based on residence (as defined by Little League Baseball, Incorporated) and/or age, such participant and/or team on which he/she participates be found ineligible, and forfeit(s) and/or suspension of Tournament privileges may be decreed by action of the Little League International Charter Committee or Little League International Tournament Committee.
- If we agree that our child (candidate) may be required to try out for a team. If such does not attend at least 50 percent of the tryouts, local Board-of -Directors' approval is required for such candidate to be placed on a team. If applicable, I/We understand that our child (candidate) may be chosen at any time to play on a Major Division team, if he or she is of the correct age for such division as determined by the local league and Little League Baseball. Declining to move up to such Major Division team will result in forfciture of eligibility for the Major Division for the current season, and may be subject to further restrictions by the local league.

**Player Information** 

I/We will furnish a certified birth certificate of the above-named candidate to League Officials.

I/We understand that my information as the parent or guardian of such above-named candidate is sent by the local league International each year. Such use of information by Little League International can be found here: www.LittleLeague.org/privacypolicy. You may opt-out of communications from Little League International at any time.

Signature: