

SPRING 2024 REGISTRATION



HOW TO REGISTER* SIMPLY SCAN THIS CODE WITH YOUR PHONE



ONLINE www.MHCLL.org

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

COSTS - EARLY BIRD JAN 1-31, 2024

\$40 FOR TEE BALL AND JR ROOKIES

\$65 FOR ROOKIES, MINOR AND MAJOR LEAGUE*

COSTS - FEB 1- MARCH 1 DEADLINE

\$50 FOR TEE BALL AND JR ROOKIES

\$75 FOR ROOKIES, MINOR AND MAJOR LEAGUE*

ASSISTANCE WITH REGISTRATION COST IS AVAILABLE*



IMPORTANT DATES AND INFO

ROOKIE MACHINE PITCH ASSESSMENTS - (PLAYERS 7-8) FEB 25 START 1 PM - 2:30 PM/ MON FEB 26 - 5:30 PM -7 PM MINOR AND MAJOR LEAGUE TRYOUTS - (PLAYERS 9-12) FEB 25 START 3 PM - 4:30 PM/ MON FEB 26 - 5:30 PM -7 PM (*All players of all ages are required to attend, unless previously drafted on a majors team.)

WHERESWINSON PARK, MOREHEAD CITY

MAJOR LEAGUE DRAFT HELD ON TUESDAY, FEBRUARY 27TH

OPENING CEREMONY

WHEN SATURDAY, MARCH 23 @ 4:00 pm

WHERE SWINSON PARK, MOREHEAD CITY

SKILLS CLINICS FOR T-BALL AND JR ROOKIES FEB 4TH @ 1:00pm LIKE & FOLLOW US ON FACEBOOK TO STAYUP 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:

CONTACT: CHUCK LINDNER, EMAIL: CAPTFRITZ@EMBARQMAIL.COM, PHONE: 252-241-2000 SCOTT MCCOY, EMAIL: SMCCOY16@HOTMAIL.COM. PHONE: 252-269-2208



WE LOOK FORWARD TO SEEING EVERYONE AT SWINSON PARK FOR MHCLL'S 69th year!





Little League® Player Registration Form



	Flayer Illiorillation	
	I am registering my child for (pick one): ☐Tee Ball (3-4 yrs	Junior Rookies (5-6 yrs) □Rookies (7-8) □Minors □Majors
	Player Name:	Birthdate (mm/xx/yyyy):
	Address:	_ Gender: Male □ Female □
	Address 2 (if applicable):	League Age: League Fee:
	City:	_State: Zip Code:
	Phone: Email:	
	Shirt Size: Youth: $\square XS$ $\square S$ $\square M$ $\square L$	Adult: $\square S \square M \square L \square XL$
	Parent/Guardian Information	
	Parent/Guardian #1	Parent/Guardian #2
	Name:	Name:
	Phone:	Phone:
	Email:	Email:
	Occupation:	Occupation:
	Volunteer? ☐ Yes ☐ No	Volunteer? ☐ Yes ☐ No
	If yes, fill out "Volunteer Application"	If yes, fill out "Volunteer Application"
	Medical Information	
	Emergency contact:	Insurance carrier:
	Relationship to player:	Phone:
	Phone:	Policy:
	Media Consent and Release for Minors	
oictur	Child"). I acknowledge that signature of this form hereby grants Morehead (es, digital images and/or videos of My Child, or in which My Child may be i	the parent/guardian of (print full name of child) City Little League ("MCLL") the absolute right and permission to use photographic portraits, ncluded in whole or part, or reproductions thereof in color or otherwise for any lawful purpose LLL websites and/or social media, without payment or any other consideration.
То	rms and Conditions	
(1)	I/We, the parents/guardians of the above-named candidate for a position on a Little League team, her	reby give my/our approval to participate in any and all Little League activities, including transportation to and from the
(2)	activities. I/We know that participation in baseball or softball may result in serious injuries and protective equ	uipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold
	our child whether the result of negligence or for any other cause. If applicable, I/We agree to return upon request the uniform and other equipment issued to my/our chi	sors, participants, and persons transporting my/our child to and from activities from any claim arising out of any injury to my/
(4)	I/Wa agree to provide proof of legal recidence or school enrollment (as defined by Little Learne Resel	vall. Incorporated at Little League 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 age regulations of Little League Baseball, Incorporated, to participate in this Local League, and that if any participant on a Little League cam 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.
- I/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 forfeiture of eligibility for the Major Division for the current season, and may be subject to further restrictions by the local league.
- 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 to Little 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:	Date:
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