

# GRAND ISLAND LITTLE LEAGUE 2009 MAIL IN REGISTRATION FORM

REGISTRATION DEADLINE MARCH4, 2009

DIVISION	LEAGUE-AGE	EARLY REGISTRATION PRICE	
<b>Baseball (BB)</b>	<b>As of April 30, 2009</b>	Received by Feb 23	After Feb 23
TEE BALL	5-6 YRS	\$30	\$40
PEE WEE	6-7 YRS	\$40	\$50
INTERNATIONAL	7-8 YRS	\$50	\$60
MINORS	9-10 YRS	\$65	\$75
MAJORS	11-12 YRS	\$80	\$90
JUNIOR	13-14 YRS	\$90	\$100
SENIOR	15-16 YRS	\$90	\$100
BIG LEAGUE	16-18 YRS	\$90	\$100
<b>Softball (SB)</b>	<b>As of December 31, 2008</b>		
INTERNATIONAL	7-8 YRS	\$50	\$60
MINORS	9-10 YRS	\$65	\$75
MAJORS	11-12 YRS	\$65	\$75
JUNIOR	13-14 YRS	\$70	\$80
SENIOR	15-16 YRS	\$70	\$80

**PLEASE REMEMBER THAT THE REGISTRATION PRICE INCLUDES A PARENT OF EACH PLAYER WORKING ONE SHIFT IN THE SNACK STAND - NO EXCEPTIONS**

One form per player, please make copies or you can go to our website at [www.GrandIslandLL.com](http://www.GrandIslandLL.com) to download the form, as needed.  
If you need more information, contact Kevin Schoener at 773-6065

PLAYER NAME \_\_\_\_\_ M \_\_\_ F \_\_\_

BIRTHDATE \_\_\_\_\_ \*copy of birth certificate required for 1st year player

DIVISION \_\_\_\_\_ BB \_\_\_ SB \_\_\_ AMOUNT ENCLOSED \$ \_\_\_\_\_ (circle fee above)

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

I, as parent of the above named candidate for a position on a Little League team, hereby give my approval for participation in all league activities. I waive, release, absolve and agree to hold harmless Grand Island Little League, organizers, sponsors, supervisors, participants and persons transporting my child to and from activities for any claim arising out of injury to my child.

PARENT OR GUARDIAN SIGNATURE: \_\_\_\_\_

**ADULT VOLUNTEERS – Need to fill out a volunteer application and attach a copy of your driver’s license**

MANAGER \_\_\_\_\_ COACH(assistant) \_\_\_\_\_ LEAGUE COMMISSIONER \_\_\_\_\_ BOARD POSITION \_\_\_\_\_

UMPIRE \_\_\_\_\_ PICNIC COMMITTEE \_\_\_\_\_ OPENING DAY \_\_\_\_\_ OTHER \_\_\_\_\_

NAME \_\_\_\_\_ DAY PHONE \_\_\_\_\_ EVE PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**PLEASE SEND FORM(S) & PAYMENT TO:** GRAND ISLAND LITTLE LEAGUE  
P.O. BOX 714  
GRAND ISLAND NY 14072