

Niceville-Valparaiso Little League--2002 Registration Form

Player's Last Name: _____ Player's First Name: _____

Player's Birth Date: _____ Player's Sex: _____ Player's Years of Experience: _____
(mm/dd/yy)

Player Lives With: _____ Mother _____ Father _____ Mother and Father
(check one)

Comments: _____

For NVLL Use Only

League Age _____

Validator's Initials _____

Uniform Sizes--For NVLL Use Only

Shirt Size	Pant Size	Sock Size	Belt Size	Hat Size
Youth-Sm	Youth-XSm (20)	T-Ball (4-7)	Youth (Up to 28")	Youth (6 1/4 - 6 7/8)
Youth-Med	Youth-Sm (20-22)			
Youth-Lg	Youth-Med (24-26)			
Adult-Sm	Youth-Lg (28-30)			
Adult-Med	Youth-XLg (32-34)	Youth (8-11)	Adult (Above 26")	Adult
Adult-Lg	Adult-Sm (28-30)			
Adult-XLg	Adult-Med (32-34)			
Adult-XXLg	Adult-Lg (36-38)	Adult (9-15)		
	Adult-XLg (40-42)			

Father

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phones: Home: _____ Work: _____ Extension: _____ Mobile: _____

E-Mail: _____

Volunteer: (check one) Manager _____ Coach _____ Umpire _____ Team Mom _____

Mother

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phones: Home: _____ Work: _____ Extension: _____ Mobile: _____

E-Mail: _____

Volunteer: (check one) Manager _____ Coach _____ Umpire _____ Team Mom _____

Refund Policy:

If a player withdraws before 9 Feb, the refund will be the registration fee minus \$10
 If a player withdraws between 9 Feb and 16 Mar, the refund will be the registration fee minus \$40.
 If a player withdraws after 16 Mar, there will be no refund.

I agree to allow our child to participate in NVLL youth baseball and all associated activities.

Parent/Guardian Signature: _____ **Date:** _____

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Do the parents live within the city limits of Niceville or Valparaiso? Yes _____ No _____
 Was the birth date verified by a birth certificate? Yes _____ No _____ Initials _____
 Did the parents sign the Medical Release Waiver? Yes _____ No _____

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Reg Fee _____	}	Validator Initials _____
Non-Res Fee _____		
Late Fee _____		
Scholarship _____		
Total _____		
Cash Paid _____	}	Cashier's Initials _____
Check Amount _____		
Check # _____		
Entered Into Database _____		