



Land Park Pacific Little League 2012 Season – Registration



Take advantage of our “Early Bird” discount and register on or before December 5!

****REGISTER ONLINE OR DOWNLOAD FORMS FOR WALK-IN OR MAIL-IN REGISTRATION****

WWW.LPPLL.COM

Online Registration: Starts November 1, 2011	No online fees if you register by December 5!
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Beginning December 6, 2011 you must register online and additional fees apply.

Information Night: Thursday, November 3 from 6:30 p.m. to 8:00 p.m. at California Middle School, corner of Land Park Drive and Vallejo Way.

ALL players seeking to register must provide the following:

1. Proof of Residency – Each registering player must certify residency within the LPPLL boundaries (check the website or the map available at registration). No exceptions are made for school enrollment. Residency shall be established and supported by documents from THREE OR MORE categories (see Registration Checklist)
2. Proof of Birth Date – Each registering player must provide for inspection by a League representative an original “Certificate of Live Birth.” Abstracts are not acceptable.

Online Registration: November 1, 2011 - January 7, 2012 at www.lppll.com.

Walk-In Registration: Thursday, November 3 and Monday, December 5 from 6:00 p.m. to 8:00 p.m. at California Middle School, corner of Land Park Drive and Vallejo Way.

Mail-In Registration: Accepted until November 30, 2011. Send to: LPPLL, 2 San Mateo Way, Sacramento, CA 95822. Applications must be postmarked no later than November 30, 2011. All appropriate documents must be enclosed in order to process the application.

NOTE that those registering on line or by mail must attend a walk in registration to provide proof of residency and birth date. You must bring an *original* birth certificate [not an abstract] to show a League representative as well as a photocopy for League records. Alternatively, you may bring your proof of residency and birth date to one of the two tryouts [see below]. Players who fail to provide proof of residency and birth date will not be allowed to try out.

For walk-in and mail registration, payment must be check or money order payable to LPPLL. When you provide a check as payment, you authorize LPPLL to use the information from the check to make a one-time electronic fund transfer from your account, or to process the payment as a check transaction. You authorize us to collect a \$30 fee (plus additional bank fees) from your account if your payment is returned unpaid.

CHALLENGERS DIVISION: For youth who are mentally and/or physically challenged. Please contact Shelly Suwa, LPPLL President at shelly@lppll.com for a referral to the District 7 program.

REGISTRATION FEES

Early Bird Registration Fees:
(on or before December 5, 2011):
Ages 5-7: \$100
Ages 8-14: \$130

Regular Registration Fees:
(December 6, 2011 and after; on-line only)
Ages 5-7: \$125 + additional on-line registration fee
Ages 8-14: \$155 + additional on-line registration fee

Family Discount: Deduct \$20 for each additional player from the same family residing at the same address.

Volunteer Fund Fee: \$75 per family. This fee will be refunded to families who contribute at least 8 hours of volunteer work at LPPLL facilities and/or events. Working at the snack shack to fulfill your team's requirement does not count towards the 8-hour requirement. We need your help at a variety of events, including post-season events such as the All Star tournament.

MANAGERS AND COACHES

Applications to manage or coach a team must be submitted to LPPLL no later than December 5, 2011. The volunteer application included with the registration packet and copy of driver's license must be submitted with your application. **Note that you must provide your social security number on the volunteer application.** For your security, confidential records will be destroyed at the end of the season. The League President will notify all applicants as to the results of their application. There is a **mandatory meeting for managers and coaches on January 9, 2012**, from 6:30 p.m. - 7:30 p.m., location TBA.



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TRYOUT INFORMATION

Tryouts are **MANDATORY** for **ALL players, Little League age 8 years and older (i.e., who will be 8 or older on April 30, 2012)**. Players must attend **AT LEAST ONE** tryout. T-Ball, Rookie, and Softball Rookie players (players 5 to 7 years old) are not required to attend tryouts.

Baseball Division Age Guidelines:

Players age 5 shall play in the T-Ball Division. Players age 6 may play in T-Ball or, if requested, AND after completing one year in T-Ball, may play in the Rookie (Coach Pitch) Division. 7-year-olds typically play in the Rookie Division.

Parents or legal guardians must request in writing to the Player Agent for their division (Upper Division: kelley@lppll.com; Lower Division: johnb@lppll.com) prior to January 7, 2012 if they would like their player to try out for a possible draft in the following circumstances:

- 7-year-olds wishing to play in the Single A Division. Player must attend the 8-year-old tryout session.
- 8-year-olds wishing to be considered to participate in AAA. Player must attend the 9-year-old tryout session.
- 10-year-olds wishing to be considered to participate on a Major team. Player must attend the 11-year-old tryout session.

Note: Player may not skip levels without approval from the Board of Directors.

Softball Division Age Guidelines:

Players age 5 - 7 shall play in the Rookies (coach-pitch) Division. Players age 7 may play in Rookies or, if requested, and after completing one year in Rookies, may play in the Minors Division. Requests to deviate from these guidelines must be made in writing to the Softball Player Agent (kelley@lppll.com) prior to January 7, 2012.

Teams will be divided by skill level and based on the participation with the neighboring leagues. More information will be available prior to try-outs. Please contact the Softball Player Agent for more information.

- 9-year-olds wishing to be considered for the Majors division may (if having completed at least one year in the Minor Division), submit a written request (to either player agent) to try out and if approved attend the 10-year-old tryout session.

Dates: Saturday, January 14, 2012 and Saturday, January 21, 2012.
Rain day make-up **ONLY** if needed, Saturday January 28, 2012.

**Please check the league website blog before tryouts for any changes and weather updates for tryouts:
www.lppll.com**

Location: CK McClatchy High School, 3056 Freeport Blvd. (Enter at north entrance from Freeport Boulevard - parking adjacent to fields.)

Tryout Times: Please arrive 20 minutes prior to your tryout time to sign in.

12 yr. olds -- 9:00 a.m. to 10:30 a.m.

11 yr. olds --10:30 a.m. to 12:00 p.m.

10 yr. olds -- 12:00 p.m. to 1:30 p.m.

9 yr. olds -- 1:30 p.m. to 3:00 p.m.

8 yr. olds -- 3:00 p.m. to 4:30 p.m.

13 & 14 yr. olds -- To Be Announced.

NOTE: Softball times may change depending on need. Please check website prior to January 14, 2012 for more information.

TRYOUT INFORMATION - *continued*

Notes Regarding Tryouts and the Draft:

Players are drafted based on playing ability. **Final placement of all players will be determined by the LPPLL Player Agents, Divisional Representatives and Board of Directors.**

Parents or legal guardians may request that their child not be placed above a certain level (i.e., a parent/guardian may request that his/her child does not move up to AAA but remain in AA). All such requests must be made in writing to the Player Agent for their division prior to January 7, 2012. No parent may request that his/her child move up (i.e., that the child play AAA, instead of AA). That decision is up to the managers to be made during the draft.

Prior to January 7, 2012 and by written request to the Player Agent for the appropriate division, parents who have two players of similar age and playing ability may request that these siblings be placed on the same team.

The Player Agents, Divisional Representatives and Board of Directors shall keep in mind the ability and safety of the player and the other players in the division when evaluating these requests.

Team selections and practices begin in late February. The manager of your child's team will contact you.

All Stars

Players age 9 and up playing in Division AAA are eligible to be selected for the LPPLL All-Star teams. In order for your child to be considered your player's commitment is required during the tournament season. This commitment consists of being available DAILY for practices and games from June 15th until at least mid-July and possibly mid-August, depending upon the success of the team. Please keep this commitment in mind when making summer vacation plans.



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PLAYER APPLICATION

Please Print Clearly

Date: _____ Player's Name: _____ (circle) Male Female

Birth date: ____/____/____

Player Registering For: (circle) Baseball (Age as of April 30, 2012) _____

Softball (Age as of December 31, 2011) _____

Parent/Guardian 1

Name _____ Relation _____ Home Phone: _____

Cell Phone: _____

Address: _____ Zip 958 _____

E-mail address: _____

Parent/Guardian 2

Name _____ Relation _____ Home Phone: _____

Cell Phone: _____

Address: _____ Zip 958 _____

E-mail address: _____

First year with LPPLL? (circle) Yes No

Other children from family registering for the league: _____

Last Year's Team and Division Level at LPPLL: _____

For T-Ball and Rookie Leagues ONLY – Team/Manager/Player pairing requested (optional): _____

Note: Placement of all players will be determined by the LPPLL. Player's eligibility is subject to verification of age and residency by LPPLL and Little League Baseball and Softball, Inc.

LEAGUE USE ONLY:

Original Birth Certificate: Yes / No _____ Seen by: _____ Copy of Birth Certificate For LPPLL files YES/NO

Proof of Residency (3 different types) 1. _____ 2. _____ 3. _____

Any other Comments: _____



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PARENT/GUARDIAN RESPONSIBILITY AGREEMENT

Date: _____ Player's Name: _____

I/We, the parent(s) or Guardian(s) of the above named candidate for a position on a Land Park Pacific Little League team, hereby give my/our approval for his/her participation in any and all Little League activities during the current season. _____ (initials)

I/We assume all risks and hazards incidental to such participation including transportation and agree to hold harmless the Land Park Pacific Little League, Little League Baseball Inc., its Board, the organizers, sponsors, supervisors, participants, and persons transporting my/our child to or from activities for any claim arising out of any injury to my/our child. _____ (initials)

I/We hereby acknowledge that the final placement of my/child on a team is the prerogative of Land Park Pacific Little League. In the event that my child is selected by any Manager with the concurrence of the Board to play on the designated team or in a higher or lower division than he/she was originally assigned, I will agree to the selection rules set forth by Land Park Pacific Little League and Little League Baseball, Inc. _____ (initials)

I/We agree to return upon request, equipment issued to my/our child in as good as when received condition except for normal wear and tear. I/We agree to reimburse Land Park Pacific Little League for market value if the equipment is destroyed, lost, or not returned when requested by Little League officials. _____ (initials)

I/We agree if my child/children lose all or part of their uniform, I/We will replace the uniform, or reimburse the league for the replacement. Note: The minimum value of any uniform top is \$15.00 and hat/visor is \$10.00. _____ (initials)

I/We will furnish a certified birth certificate and proofs of residency of the above named candidate. _____ (initials)

I/We give permission for photographs or video tapes of my child/children to be used in a brochure, web page, or in newspapers or other means for the purpose of promoting LPPLL. _____ (initials)

I/We understand that the Team's Snack Shack Duty Days are a league requirement for all parents. _____ (initials)

I/We understand that the \$75 Volunteer Fund Fee will ONLY be refunded to families who contribute at least 8 hours of volunteer work at LPPLL facilities and/or events. I/We also understand that neither the team snack shack duty nor managing or coaching counts towards this 8 hour requirement. _____ (initials)

I/We have read and agree to abide by the Code of Conduct as included in the LPPLL By-Laws (aka Local Rules). _____ (initials)

Parent or Guardian Signature: _____

VOLUNTEER SUPPORT

LPPLL like any volunteer organization is dependent upon the support of the participants and their families. It takes a significant number of dedicated individuals to provide the opportunities, learning experiences and facilities in fulfillment of these goals. Various activities throughout the year are posted at Dooley, sent out in an email format, or information is available online. Please see "For the Fridge" and www.lppll.com for upcoming events.

If you, as a parent or guardian, have specialized training, skills or equipment such as first aid/CPR trainer, plumber, electrician, welder, carpenter, mason, utility trailer, etc., that you are willing to share or are able and willing to provide services to the League, the League will be grateful.

Please list activities where you are willing to assist Land Park Pacific Little League:



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PLAYER FINANCIAL DOCUMENTATION

Date: _____ 1st Player's Name: _____ (circle) Male Female

Player Registering For: (circle) Baseball Softball

2nd Player's Name: _____ (circle) Male Female

Player Registering For: (circle) Baseball Softball

3rd Player's Name: _____ (circle) Male Female

Player Registering For: (circle) Baseball Softball

4th Player's Name: _____ (circle) Male Female

Player Registering For: (circle) Baseball Softball

List all additional Players: _____

Parent's Name: _____

Address: _____ Zip: 958 _____

Prior to December 5, 2011:

Baseball ages 5 to 7: \$100
Softball ages 5 to 7: \$100
Baseball ages 8-14: \$130
Softball ages 8-14: \$130

On or After December 6, 2011:

Baseball ages 5 to 7: \$125
Softball ages 5 to 7: \$125
Baseball ages 8-14: \$155
Softball ages 8-14: \$155

First Player Age _____	- Fee	\$ _____
Next Player Age _____	- Fee less \$20.00	\$ _____
Next Player Age _____	- Fee less \$20.00	\$ _____
Next Player Age _____	- Fee less \$20.00	\$ _____

Volunteer Fund Fee (Refundable) \$75.00 \$ 75.00

Total Registration Due \$ _____

LEAGUE USE ONLY:

Amount Paid: _____ Check# _____ Cash: _____

Any other Comments:



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MEDICAL RELEASE FORM

Please Print Clearly

Player's Name: _____

Address: _____ Zip: 958 _____

Birth date: ____/____/____ (circle) Male Female

Player Registering For: (circle) Baseball (Age as of April 30, 2012) _____
Softball (Age as of December 31, 2011) _____

Parent/Guardian Name: _____ Parent/Guardian Name: _____

Parent/Guardian 1's Work Phone: _____ Parent/Guardian 2's Work Phone: _____

Parent/Guardian 1's Home Phone: _____ Parent/Guardian 2's Home Phone: _____

Parent/Guardian 1's Pager/cell phone: _____ Parent/Guardian 2's Pager/cell Phone: _____

Parent/Guardian 1's E-mail address: _____ Parent/Guardian 2's E-mail address: _____

In case of emergency and neither parent can be reached please contact: Name _____

Relationship: _____ Phone Number: _____

In the event of an accident or other emergency, and when a parent or/a guardian is not available, I/We hereby authorize the manager, coach, or other league personnel to make such arrangements that he/she considers necessary for my/our child to receive medical and hospital care, including necessary transportation.

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency personnel. (i.e. EMT, First Responder, E.R. Physician)

Family Physician: _____ Phone: _____

Address: _____ Hospital Preference: _____

Insurance Company: _____ Insurance/Medical Record Number: _____

The purpose of the below information is to ensure that medical personnel have details of any medical problem that may interfere with or alter treatment. List any allergies/medical problems or diagnosis including those requiring maintenance medications (i.e. Diabetic, Asthma, Seizure Disorder) with information on medication, dosage, frequency of dosage the player may have:

Significant past Illness or Injury: _____

Date of last Tetanus Toxoid Booster if known: _____

WARNING

Protective equipment cannot prevent all injuries a player might receive while participating in Little League.

By signing below, I/we affirm that I/we understand the risks associated with participation in Little League. I/We understand the authorization I/we have executed, that the information provided on this form is accurate, and that I/we authorize the carrier of this form to seek medical attention in my/our absence for my/our above listed child.

Authorized Parent or Guardian Signature

Authorized Parent or Guardian Signature

Medical Release Authorization Form is to be carried by the Regular season or Tournament Team Manager.

(Medical Release form shall be returned to the League and/or destroyed due to the confidentiality of the information.)