

Mother/Guardia	ın		Home		Ot	her		
	 nail							
Father/Guardia			Home		Ot	her		
Er								
Address			-		Posta	l Code		
Current School I	layer(s) Attend							
Emergency Conf	acts							
Name			Home		Ot	her		
Re Name	lationship		Home		Ot	her		
	lationship		nome					
Family Doctor			Phone					
Family Dentist			Phone					
Sr. Challenge	rs Blastball	T-Ball	Mini-Minors	Rookie-Mii	nors Mai	nors	Majo	rc
18+	Ages 3 - 4	Ages 5 – 6	Ages 7 - 8	Ages 8 -		9 - 11	Ages 11	
\$20	\$30	\$40	\$75	\$75		90	\$90	
	olayers will be assessed for Mi dren discount: If you have mo children		ering, you are entitled to	a registration fee	eduction of \$30 each	for the third a	and	
Player Name			Division	Data of Div				_
			DIVISION	Date of Bir	th (mm/dd/yyyy)	Неа	alth Card Nu	mber
			DIVISION	Date of Bir	th (mm/dd/yyyy)	Hea	alth Card Nu	mber
Date of Last Te	nus Health Factors	(allergies, Epi-pen/Tw						mber Fee
Date of Last Te	nus Health Factors	(allergies, Epi-pen/Twi						
	nus Health Factors	(allergies, Epi-pen/Twi		es, seizures, hea		olems, other		Fee
Date of Last Te	nus Health Factors	(allergies, Epi-pen/Tw	inject, contacts/glass	es, seizures, hea	daches, back prob	olems, other)	Fee
		(allergies, Epi-pen/Twi	inject, contacts/glass	es, seizures, hea	daches, back prob th (mm/dd/yyyy)	olems, other	alth Card Nu	Fee
Player Name			inject, contacts/glass	es, seizures, hea	daches, back prob th (mm/dd/yyyy)	olems, other	alth Card Nu	Fee mber
Player Name			inject, contacts/glass	Date of Bir	daches, back prob th (mm/dd/yyyy) daches, back prob	Hea	alth Card Nu	Fee mber Fee
Player Name Date of Last Te			inject, contacts/glass Division inject, contacts/glass	Date of Bir	daches, back prob th (mm/dd/yyyy)	Hea	elth Card Nu	Fee mber Fee
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Player Name Date of Last Te	nus Health Factors	(allergies, Epi-pen/Twi	Division Division Division	Date of Bir	daches, back prob th (mm/dd/yyyy) daches, back prob th (mm/dd/yyyy)	Hea	elth Card Nu	Fee mber Fee mber
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Player Name Date of Last Te	nus Health Factors nus Health Factors	(allergies, Epi-pen/Twi	Division Division Division Division Division Division	Date of Bir Date of Bir Date of Bir Date of Bir Date of Bir	daches, back prob th (mm/dd/yyyy) daches, back prob th (mm/dd/yyyy) daches, back prob	blems, other Headolems, other Headolems, other Headolems, other	alth Card Nu	Fee mber
Player Name Date of Last Te	nus Health Factors nus Health Factors	(allergies, Epi-pen/Twi	Division Division Division Division Division Division	Date of Bir Date of Bir Date of Bir Date of Bir Date of Bir	daches, back prob th (mm/dd/yyyy) daches, back prob th (mm/dd/yyyy) daches, back prob	blems, other Headolems, other Headolems, other Headolems, other	alth Card Nu	Fee mber
Player Name Date of Last Te	nus Health Factors nus Health Factors nus Health Factors	(allergies, Epi-pen/Twi	Division Division Division Division Division Division Division Division	Date of Bir Date of Bir Date of Bir Date of Bir Date of Bir	daches, back prob th (mm/dd/yyyy) daches, back prob th (mm/dd/yyyy) daches, back prob	Head olems, other Head olems, other Head olems, other ption Fee(s)	alth Card Nu alth Card Nu alth Card Nu	Fee mber

Uniform Deposit Cheque: in the amount equest to have your cheque returned to yo			eques will be destroyed (unless you
		_	
2. Concession Volunteer Deposit Cheque: rolunteer concession duty. Each family will			a DO NOT fulfill your assigned
	be required to work up to two sinits pe	r cilila.	
<u>DR</u>		This are sent to the sent to t	hardan ka fulfillaran arabadan
Concession Volunteer Exemption Fee in the luties, however, you are still required to ful	-		
NEW PLAYERS ONLY: please provide copy on Additional Volunteer Information: Central Sofits members. Please indicate one or more concession duties above:	Saanich Little League is a parent-particip	pation association dependent on fur	_
	Division Coordinator Equipment/Maintenance Concession Team ect to available space on teams and directal circumstances such as medical reason		Fundraising Player Agent Scheduling
We, the parents or guardians of the above of parents/guardians and we agree that we and all Little League activities and we assumitive, release, absolve, indemnify and agree participants and persons transporting our of pur children, whether the result of negligent insurance. We agree to return upon requestive and tear. We will furnish a certified bit communications including emails from CSLL plural shall include the singular as the case retains to the same of the same o	d our children will abide by these. We he all risks and hazards incidental to such the all risks and hazards incidental to such the to hold harmless Central Saanich Little hildren to and from activities, its related to ce or for any other cause, except in the set the uniform and other equipment issuit the uniform and other equipment is the certificate of the above children to league activities. (If	nereby give our approval for the about participation including transportal eleague and its representatives, organizations and officials, from an extent and in the amount covered be ded to our child in as good condition league officials upon request by the	ove children to participate in any tion to and from activities. We ganizers, sponsors, supervisors, by claim arising out of an injury to by their accident or liability as when received except for normatim. We accept to receive
iignature of Parent/Guardian		Date	

CSLL privacy, policies and rules of conduct can be viewed at www.cslittleleague.com