



Greenwich Village Little League Application Form - 2012 Season

www.gvllnyc.com
10 White Street
New York, NY 10013

Complete this blank form, and bring it to one of the three Registration Days. Please review information for accuracy and update this form. Be sure to bring it with you to registration. Additional forms for siblings and friends can be downloaded from the GVLL web site @ www.greenwichvillagelittleleague.org

PLAYER INFORMATION	PARENT INFORMATION																																			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border: 1px solid black;">First Name</td> <td style="width:50%; border: 1px solid black;">Last name</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">Address</td> </tr> <tr> <td style="width:33%; border: 1px solid black;">City</td> <td style="width:33%; border: 1px solid black;">State</td> <td style="width:33%; border: 1px solid black;">Zip</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;">Home Phone</td> </tr> <tr> <td style="width:60%; border: 1px solid black;">Birth date</td> <td colspan="2" style="border: 1px solid black;">Gender</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;">School</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;">Email</td> </tr> </table>	First Name	Last name	Address		City	State	Zip	Home Phone			Birth date	Gender		School			Email			<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="border: 1px solid black;">Father</td> </tr> <tr> <td style="width:50%; border: 1px solid black;">Home Phone</td> <td style="width:50%; border: 1px solid black;">Cell Phone</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">Job (opt)</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">Volunteer</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">Mother</td> </tr> <tr> <td style="width:50%; border: 1px solid black;">Home Phone</td> <td style="width:50%; border: 1px solid black;">Cell Phone</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">Job (opt)</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">Volunteer</td> </tr> </table>	Father		Home Phone	Cell Phone	Job (opt)		Volunteer		Mother		Home Phone	Cell Phone	Job (opt)		Volunteer	
First Name	Last name																																			
Address																																				
City	State	Zip																																		
Home Phone																																				
Birth date	Gender																																			
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<p>GVLL is a volunteer organization. All parents are expected to help. Select a volunteer activity that's right for you and write it in the volunteer box above.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Fundraising</td> <td style="width:25%;">Umpire</td> <td style="width:25%;">Equipment</td> <td style="width:25%;">Trophies</td> </tr> <tr> <td>Website</td> <td>Data Entry</td> <td>Teach Manager</td> <td>Opening Day Set Up</td> </tr> <tr> <td>Picture Day</td> <td>Field Prep</td> <td>Team Coach</td> <td>Opening Day Break Down</td> </tr> <tr> <td></td> <td></td> <td>Summer Manager</td> <td>Opening Day T-Shirts</td> </tr> <tr> <td></td> <td></td> <td>Division Coordinator</td> <td>Team Safety Officer</td> </tr> </table> <p>Sponsorship a team for \$500 (before 12/31/2011, \$750 thereafter). Contact gvllboard@gmail.com</p>	Fundraising	Umpire	Equipment	Trophies	Website	Data Entry	Teach Manager	Opening Day Set Up	Picture Day	Field Prep	Team Coach	Opening Day Break Down			Summer Manager	Opening Day T-Shirts			Division Coordinator	Team Safety Officer	<p style="text-align: center;">Comments/Notes</p>
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The following must be submitted with every application:

Registration Fee: \$175 plus \$150 for each additional sibling. Make checks out to GVLL. Scholarships available upon request.

Proof of Residency: (new players only) This can be a copy of a driver's license, utility or rent receipt, etc. GVLL serves the area primarily west of Broadway, from Canal to 59th Street. PLEASE STAPLE A PHOTOCOPY TO THIS FORM!

Proof of Age: (new players only) For the 2011 Baseball Season, any player with birthdates between May 1993 and April 2007 is eligible. Proof can be a copy of birth certificate, passport, etc. PLEASE STAPLE A PHOTOCOPY TO THIS FORM!

<p>Medical: Please indicate any relevant medical, physical, or other conditions, limitations, or circumstances</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;">Baseball</td> <td style="width:20%;"></td> </tr> <tr> <td>Softball (girls only)</td> <td></td> </tr> <tr> <td>Both (girls only)</td> <td></td> </tr> <tr> <td>Fall Baseball</td> <td></td> </tr> </table>	Baseball		Softball (girls only)		Both (girls only)		Fall Baseball	
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REGISTRATION
 Returning players can register online at www.gvllnyc.com
 First time registrants must come in person to:

1. Saturday, January 8, 2011, 12-2pm at the Hudson Guild Fulton Community Center, 119 9th Avenue between 17th and 18th Streets
2. Sunday, January 9, 2011, 10-2pm at the Tony Dapolito Recreation Center, 1 Clarkson Street, corner of Varick St.
3. Wednesday, January 12, 2011, 7-9 pm at the Tony Dapolito Recreation Center.

CASH	CHECK	SCHOLARSHIP
REGULAR SIBLING CONTRIB FALL		
LATE FEE A/U UNIFORM OTHER		

AFFIRMATION:

I/We am/are the parent(s) or legal guardian(s) of this applicant and give approval for him/her to participate in all GVLL activities, including games, practices, events, and transportation to and from activities. **GVLL is a volunteer organization. All parents are expected to help. Select a volunteer activity that's right for you and write it in the volunteer box above Comments/Notes.** I/We know that participation in baseball may result in serious injuries and that protective equipment does not prevent all injuries to players. I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless GVLL, Little League Baseball Inc., the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities, for any claim arising out of injury to my/our child, whether the result of negligence or for any cause, except to the extent and in the amount covered by the Little League accident or liability insurance. I/We certify that the applicant is physically able to play sports, and that all information given in this application is true. I/We understand that our child is responsible for regular attendance at games in order to remain on the team roster. I/We will assist the GVLL by volunteering when I/We can.

SIGNATURE OF PARENT OR LEGAL GUARDIAN	DATE
SIGNATURE OF APPLICANT	DATE

