

REGISTRATION 2025/26



LEAGUE CHAIRMAN: PATRICK HUTCHISON 07305838702 EMAIL: LITTLELEAGUEWALLINGTON@GMAIL.COM

CHILD'S NAME:	DATE OF BIRTH:	SCHOOL YR AS OF SEPT 2025:		
	PREFERRED POSTION:			
MEDICAL CONDITIONS:	KIT SIZE: (See Size Guide Below)	PARENTS/GUARDIANS NAME:		
ADDRESS:	EMAIL:	TELEPHONE:		

KIDS' TOP AND BOTTOM										
Size		Height		Chest		Waist		Hip		
	Age	(cm)	(inches)	(cm)	(inches)	(cm)	(inches)	(cm)	(inches)	
6XS	4-5	100-108	39.37-42.52	55-57	21.65-22.44	54-55	21.26-21.65	60-62	23.62-24.41	
5XS	5-6	109-117	42.91-46.06	58-61	22.83-24.02	56-57	22.05-22.44	63-65	24.80-25.59	
4XS	7-8	118-128	46.46-50.39	62-66	24.41-25.98	58-60	22.83-23.62	66-68	25.98-26.77	
3XS	9-10	129-140	50.79-55.12	67-72	26.38-28.35	61-64	24.01-25-19	69-74	27.17-29.13	
2XS	11-12	141-152	55.51-59.84	73-79	28.74-31.10	65-68	25.59-26.77	75-80	29.52-31.50	
xs	12-14	153-164	60.24-64.57	80-87	31.50-34.25	69-72	27.17-28.35	81-86	31.89-33.86	

I/we, the Parent/Guardian of the above-named child, hereby any and all league matches.	y give consent for their participation in Yes/No
I/we do not hold the organisers responsible for any claims a Except to the extent and in the amount covered by the person by Wallington Little League. In the event of an accident/illness of your child if you are not for a First Aider to treat your child if necessary and call an	onal accident insurance policy arranged Yes/No ot in attendance do you give permission
As a Parent/Guardian of the above child I agree that they maken whilst participating as a member of WLL. These photoand/or social media accounts without giving the child's name	tos may be used on the League's web site
Membership fees submitted are non-refundable, except in e	exceptional circumstances.
All players must be available to play on a Sunday. If any holidays, then the manager must be informed so they can decompletely necessary, so please make your manager aware	ecide whether to seek a postponement if
WLL is subject to the legislation within the Child Act. We relevant information to ensure your child's well-being and pevent you are not present. Please supply all necessary details to date of any changes to this information.	permission to act in any emergency in the
The fee for the season is £50.00 payable on signing.	
Fee paid	ue/cash
BACS: Wallington Little League (Business account), Acc N	No. 71007769 / Sort Code 40-45-17
If paying by Bacs please confirm with the Secretary/Charin Players name as a payment reference. (<i>Please include Surn</i>	± •

Date.....

Please add any additional information required below:

Signed