

Clifton Little League 2023 TeeBall/Baseball, 50x70 & 60x90, Challenger Registration

TODAY'S DATE					
PLAYER'S NAME	BIRTHDATE/				
STREET	CITYZIP				
SCHOOL	_GRADEAGE	-			
PARENT/GUARDIAN NAME (1)	ном	<u> </u>	CELL		
PARENT/GUARDIAN NAME (2)	HON	1E	CELL		
EMAIL ADDRESS					
LEVEL OF PLAY: TBALLJDINT'L	MAJORS50X70	60X90	Challenger		
INTERESTED IN: MANAGINGCOACHING	VOLUNTEERING/COMMIT	ΓΕΕRUTGERS CI	ERT		
SHIRT SIZE: YS YM YL YXL AS AM AL AXL	PANT SIZE: YS YM YL YXL /	S AM AL AXL (incor	rrect size may r	result in add'l fee)	
TALENT/TRADE THAT MIGHT ASSIST LEAGUE (ele	ectrician, carpenter, DJ,plumb	er)			
does not prevent all injuries to players, and do hereby waive, in the local Clifton Recreation Department, Clifton Athletic Assoc sponsors, supervisors, participants, and persons transporting rof negligence or for any other cause, except to the amount coequipment issued to my/our child in as good a condition as who return uniform will result in up to a \$50 uniform replaceme I/We will furnish a copy of a birth certificate of the above nam Officials if requested.	ciation, Clifton Little League Division, t my/our child/children to and from act vered by accident or liability insurance nen received except for normal wear a nt fee. led candidate to Clifton Little League I	ne organizers, vities for any claims arising I. I/We agree to return upo nd tear. Failure Division League	on request the unifo	**	he result
PARENT(S) OR GUARDIAN(S) SIGNATURE			<u> </u>		
Your signature also gives permission for your ch	iild's image and/or name to	appear on Clifton Litt	tie League web	osite or social media.	
***	*FUNDRAISER for EVERY PLA	YER****			
Baseball Mania Tickets – consists of selling 5 ticke				0.	
Clifton Little League will be having other fundra (initial your agreement)	isers through the course of t	he season. All playe	rs are to suppo	ort to their best of the abili	ties.
	****KITCHEN DUTY****				
MANDATORY- every player is REQUIRED to hav games per season according to the schedule pro I agree to provide assistance according	e an adult represent him/or epared by the Manager/Tear				s, 2
I have received, read and agree to the 'Code of	Conduct'(Please	e initial)			
Paid Tagging Yes	Official Use Only No				
Amount Collected \$	Cash Check#_	Date Rec	c'd	Rec'd by	
Medical Form Yes No		_			

SORRY NO REFUNDS