



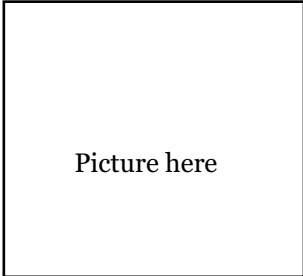
# FORDHAM BEDFORD LITTLE LEAGUE

2751 Grand Concourse, Bronx NY 10468 (917) 645-9511  
www.fbllnet.org



## Player Application Form

Player's Name: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 School Currently Attending: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Email: \_\_\_\_\_



Did you play FBLL last spring?  Yes  No  
 If yes, has the above address changed since last season?  Yes  No

**Date of Birth:**  
 \_\_\_\_/\_\_\_\_/\_\_\_\_  
 mm    dd    yy  
**Gender:**  M  F

In Case of Emergency CONTACT (other than above)  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Relationship \_\_\_\_\_  
 Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Medical Insurance Co: \_\_\_\_\_ Policy #: \_\_\_\_\_  
 List any allergies, medical problems, and prescription medications: \_\_\_\_\_  
 \_\_\_\_\_

Parent/Guardian #1	Parent/Guardian #2
Name: _____	Name: _____
Address: _____	Address: _____
Phone #1: _____	Phone #1: _____
Phone #2: _____	Phone #2: _____
Email: _____	Email: _____

**CANDY SALE FUNDRAISER.** Mandatory, every child registered with FBLL must sell at least one box of candy. Details to be announced.

**Release Waiver (parent or guardian must sign):**  
 I support the Fordham Bedford Little League focus on Sportsmanship and respect for others I acknowledge that the above noted player property resides within league boundaries as posted. I hereby give my approval for my child to participate in any and all Little League activities including transportation to and from activities. I know that participation in baseball may result in serious injuries and that protective equipment does not prevent all injuries to players, and I hereby waive release absolve indemnify and agree to hold harmless Fordham Bedford Little League Incorporated the organizers, sponsors, supervisors participants and persons transporting my child to and from activities for any claim among out of an injury to my child whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance. In case of an emergency, if the Primary Care Physician cannot be reached , I hereby authorize the above noted player to be treated by another physician. I agree to return upon request any equipment issued to my child in as good of condition as when received, expect for normal wear and tear. Players new to Fordham Bedford Little League will not be placed on a team until proof of residence and age has been verified. Fordham Bedford Little League will not returned any money once the child has received a uniform and played one game.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Fees are based on the player's age on April 30th, 2009. Find your fee in the table on the right and enclose a money order (no personal checks, please) for that amount, payable to Fordham Bedford Little League.**

DIVISION	AGE	FEE
	(as of April 30th 2009)	
T-Ball	5-6	\$100.00
Rookies	7-8	\$110.00
Minors	9-10	\$110.00
Majors	11-12	\$135.00
Juniors	13-14	\$150.00
Seniors	15-16	\$160.00

**The Fordham Bedford Little League does not authorize any team manager or coach, or any other person, to collect money from participants for any reason or purpose whatsoever; and participants should not, under any circumstances whatsoever, give any money or thing of value to any team manager or coach, or to any other person purporting to represent or act on behalf of Fordham Bedford Little League. The Little League shall not be obligated or responsible for any loss suffered by any participant who does so.**