



Little League® Baseball and Softball School Enrollment Form



To Be Filled Out By Parent/Legal Guardian

Date Requested: _____

League Name: _____

League ID# : 00130142

Player/Student Name: _____

Date of Birth: _____

Division: (Check One)	<input type="checkbox"/> Baseball	Level: (Check One)	<input type="checkbox"/> Tee Ball	<input type="checkbox"/> LL (Majors)	<input type="checkbox"/> Junior
	<input type="checkbox"/> Softball		<input type="checkbox"/> Minors	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Senior
					<input type="checkbox"/> Big

Parent/Guardian Address: _____
(Street) (City/State) (Zip)

(Name (Printed) of Parent/Legal Guardian)

(Signature of Parent/Legal Guardian)

(Date)

To be filled out by School Administrator, Principal or Vice Principal

I, _____ of _____ School, located at
(Print Name) (Print School Name)

_____. Hereby verify that _____
(Physical Address) (Student Name Printed)

has enrolled and is attending above named school location for the _____ academic year prior to
(Year)

October 1st, of the current year.

This student has been enrolled as of _____
(Date)

(Signature)

(Date)

Title (School Administrator, Principal or Vice Principal)

If the Charter/Tournament Committee subsequently finds that the information submitted as acceptable documentation regarding school enrollment/attendance now shows that the previously submitted information/documentation was falsified, misrepresented or insufficient then Little League Baseball, Incorporated reserves the right to impose sanctions and/or penalties on all appropriate parties, including but not limited to players, coaches, league officials and/or the league which could result in suspension and/or terminations with Little League Baseball, Incorporated.

The District and the Local League will maintain this form and supporting documentation in their files. Completion of this form is only required ONCE during a participant's career, unless the school enrollment changes. A II(d) would then be required.