New Malden Little League – Player League Registration Form 2020/2021  Player Details (address should be home of Parent/Guardian 1 below)									
First Name:			Details (address should i	Last Name:	ent/Guarai	an 1 bei	ow)		
1st Line Home Address:				<u> Lact Hame.</u>					
2 <sup>nd</sup> Line Home Address:									
Home Town/City:									
Home Post Code:		Date of Birtl	h			Gender:			
Full name of brother/sister			Brother/sister's Team Name:						
Parent / Guardian 1 Details (Player should live with this Parent/Guardian at the address above)								ove)	
First Name:				Last Name:					
Email Address:									
Mobile/Phone Number:									
Relationship to Player:			Father / Mother / Guardian (please circle as appropriate)						
Parent / Guardian 2 Details									
First Name:				Last Name:					
Email Address:									
Mobile/Phone Number:									
Relationship to Player:			Father / Mother / Guardian (please circle as appropriate)						
Player's Medical – If none then please			of any medical conditions.	ny medical conditions.					
	of an ad	ult with permi	contact phone/mobile ssion to take child away bove.						
I/we give permission for my/our child to lead adult supervision (please tick) – Junior Plateave without parent/guardian				Yes			No		
Children must be aged 7, and under 13, as at 31 <sup>st</sup> August 2020 to be eligible and not be committed to other activities on Saturday morning League and Cup matches are played on Saturday mornings, kicking off at either 9.30, 10.30 or 11.30 am from September to March.									
Parent/Guardian Consent: In the event that my/our son/daughter is taken ill and/or is injured whilst playing/training and I/we cannot be contacted I/we give my/our consent for my/our child to receive medical attention.									
I/we confirm that I/we have read and agree to follow the League's Rules and Code of Conduct for parents, spectators and players which is displayed on the League's website. I/we understand that sanctions may be imposed by the League should there be any breach of this agreement.									
I/we will sign the League's Data Protection and Confidentiality Consent Form									
I/we agree to return the playing kit (shirt, shorts, socks) as soon as my son/daughter has left the League.									
I/we will inform the League immediately of any changes to the information provided on this form.									
I/we give our approval to our child's participation in all Little League Activities and apply for membership of £40 pounds for the season. Discount for siblings and/or exceptional circumstances. Additional expenses may apply for non-League game activities.									
At least one parent/guardian must complete and sign all League forms. Where two parents/guardians have been listed above then both must sign below and all other forms. All signatories to this form must complete a Data Consent Form.									
Signing Parent/C Name – (print cl		<u>1: Full</u>							
Parent/Guardian 1: Signature						Date			
Signing Parent/Guardian 2: Full Name – (print clearly)									
Parent/Guardian 2: Signature						Date			