



2026 Spring Valley Girls Softball Player Registration Form

(Please Print Legibly)

You may make additional copies of this form if you have more than 1 child to register

INTERNAL: This Box is for Official League Use Only.

☐ -Paid Cash ☐ -Paid Check # _____

1 Player \$75.00, \$10.00 Discount for Each Add. Player

Player's Name:

Street Address:

City/State/Zip:

Player's Birth Date:

Player's Home Phone:

Player's Age as of 01/01/2026:

Number used for Text alerts:

What League are you
Registering your
Child for

Instructional
(8U)
Age 7-8

Minor
(10U)
Age 9-10

Major
(12U)
Age 11-12

Junior
(14U)
Age 13-14

Player's Shirt Size

Youth→

Small (6-8)

Medium (10-12)

Large (14-16)

Adult→

Small

Medium

Large

XL

XXL

XXXL

Parent #1 Information

Name:

Street Address:

City:

Phone:

Occupation:

Email:

Are you Interested in Volunteering for any of the following (please mark all that apply):



Coaching



Concession Stand



Umpire

Parent #2 Information

Name:	
Street Address:	City:
Phone:	Occupation:
Email:	
Are you Interested in Volunteering for any of the following (please mark all that apply): ☐ Coaching ☐ Concession Stand ☐ Umpire	

I, a parent/guardian of the above-named candidate for a position on a Spring Valley Girls Softball team, hereby give my approval to participate in any and all Little League activities, including transportation to and from the activities.

I know that participation in baseball may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless the Spring Valley Girls Softball LL, Little League Softball, Incorporated, the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities from any claim arising out of any injury to my child whether the result of negligence or for any other cause.

I agree to return, upon request, any equipment issued to my child in as good conditions as when received except for normal wear and tear.

I agree to provide proof of legal residence (as defined by Little League, Incorporated) and age. I understand that my child (candidate) must be eligible under the residence and age regulations of Little League, Incorporated, to participate in the Spring Valley Girls Softball League, and that if any controversy arises regarding residence and/or age, the decision of the Charter Committee in Indianapolis, IN shall be final and binding.

I will furnish, upon request, a certified birth certificate of the above-named candidate to League Officials

Parent/Guardian Signature: _____ Date: _____

NOTE: Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.

(Revised: February, 2024)

Official Usage Only	
Medical Release Completed	Player Designated to Team
Player Data Entered	

