

Little League[®] Baseball and Softball School Enrollment Form



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.

	y Parent/Legal Guardi						
			Le	League ID#:			
Player/Student Name:			Da	Date of Birth:			
Division: (Check One)	□ Baseball □ Softball	Level: (Check One)	□ Tee Ball □ Minors		☐ Junior ☐ Senior	LEAGUE OFFICIAL ONLY	
Parent/Guardia	n Address:						
		(Street))	(City/State)		(Zip)	
(Print Name of Parent/Legal Guardian) (Signature of Parent/Legal Guardian) (Date)							
To be filled or	ut by School Ad	ministrato	r, Principal,	or Vice Principal			

I,	of		School, located at		
(Print Name) (Physica	l Address)	(Print School Name) ;(School Phone Number)	hereby verify that		
(Print Student Name) academic year prior to Octo		is attending the above named school academic year.	for the(Year)		
This student has been enroll	ed as of(Date)				
(Signature)	(Date)	Title (School Administrator, Principal,	Fitle (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.