2024 All-Stars Baseball & Softball Player Participation Form

Please read the entire form carefully.

Every family must return this form to their current team manager or team parent no later than **April 26, 2024**.

Player's Name (print):	Date	Date of Birth:	
Does NOT want to participat	e in the All-Stars season. Sign below	w and return to the Leag	ue.
WANTS to participate in the atherest than the date in	All-Stars season (if selected). Pleason dentified above.	e follow the instructions	below, and sign and return
If participating, please circle the p	olayer's age. (Baseball: age as of Augu	ust 31, 2024. Softball: age a	as of 12/31/2023)
9-years-old 10-years-old	11-years-old 12-years-old	d 13/14-years-old	15/16-years-old
Jersey size:	Pant Size:	Hat Size:	
may be ordered and obtained by Lea sizes so that in the event they are sel	osters must remain confidential until the gue officials prior to the roster annound lected for a team, a uniform will be imn ed by the parent or player. Any replace of for size selection.)	cements. Therefore, all app nediately available for the p	olicants must select uniform olayer. GDLL will not be
Parent Responsibilities			
IMMEDIATELY upon selection to t	the team, parents must provide the	following to the All-Star	s Manager:
	of Residency (required by Little Leag n certificate (will be returned to the on Fee	-	
	Little League International and will ent. Players are not permitted to pa	•	
the announcement date until the	he player must be available for the team has been eliminated from the team by the Board of Direction	I from play. If a player m	- · · · · · · · · · · · · · · · · · · ·
selected for a team, I agree to ab	at my child will (or will not), as indic ide by the tournament playing rules obligations to the local League must	s and any local league red	quirements for
Print Parent's Name:	Signature: _		
Print Player's Name:	Signature: _	Signature:	