

**PLAYERS AGENT'S USE**

New Player's Birth Cert. / Equiv. \_\_\_\_\_  
President's Initials \_\_\_\_\_  
Current Year **2025** \_\_\_\_\_  
League Age \_\_\_\_\_  
Team \_\_\_\_\_  
Major \_\_\_\_\_ Minor \_\_\_\_\_

**\* FOR LL USE ONLY**

\* Birth Cert./Equiv. \_\_\_\_\_ Yes \_\_\_\_\_ No  
\* Registration Fee \_\_\_\_\_ Yes \_\_\_\_\_ No  
\* Cash Amount \$ \_\_\_\_\_  
\* Check Amount \$ \_\_\_\_\_  
\* Credit Card \_\_\_\_\_  
\* \_\_\_\_\_  
\* \_\_\_\_\_ Major \_\_\_\_\_ Minor \_\_\_\_\_ Other

**PISCATAWAY LITTLE LEAGUE REGISTRATION FORM 2025**

**AGES 7 - 12**

**REGISTRATION FEE: \$125.00 PER INDIVIDUAL**

The Board Members of the Piscataway Little League pride themselves on keeping our Little League program affordable for every family and is committed to ensure no child is left out because of the ability to pay.

**Registration will be held at the Little League Complex January 13,22 and the 29th from 6:00 pm to 7:30 pm**

**or Mail the form with the registration fee to PO Box 452**

**Registration for the Challenger Division will be held on the same dates.**

**2025 MANDATORY FUNDRAISER**

The 2025 fundraiser will be raffle tickets. You must sell 20 tickets at \$5.00 a piece for a total of \$100.00. Money and stubs will be due approximately 3 weeks after opening day. Players that do not turn in the funds will not be eligible to play in games until the money is handed in. You must sell all tickets...we do not take any tickets back that were not sold. If you cannot sell them, you must purchase them yourself.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE CLEARLY PRINT NAME AS IT APPEARS ON BIRTH CERTIFICATE OR EQUIVALENT.**

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Mothers Name \_\_\_\_\_

Email Address \_\_\_\_\_ Fathers Name \_\_\_\_\_

School nearest you home \_\_\_\_\_

School you attend \_\_\_\_\_

Team played on **Spring 24** Check one: \_\_\_\_\_ Major \_\_\_\_\_ Minor \_\_\_\_\_ Rec \_\_\_\_\_ Challenger

Team name \_\_\_\_\_ Managers name \_\_\_\_\_

Sibling on a team: \_\_\_\_\_ YES \_\_\_\_\_ NO Team name if yes \_\_\_\_\_

Sibling trying out: \_\_\_\_\_ YES \_\_\_\_\_ NO

Played in another town last year? \_\_\_\_\_ YES Name of town: \_\_\_\_\_

**CONSENT OF PARENT OR GUARDIAN**

I, the parent/guardian of the above-mentioned candidate for a position on a Little League baseball team, hereby give my approval to his/her participation in any and all league activities during the current season. I assume all risks and hazards incidental to such participation including transportation to and from activities;

and I do hereby waive, release, absolve, indemnify, and agree to hold harmless, the local Little League, Little League Baseball, Inc., the organizers, sponsors, supervisors, participants and persons transporting my child to or from activities, for the amount covered by accident or liability insurance.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**VOLUNTEER OPPORTUNITIES**

**ROLE OF PARENTS**

The Piscataway Little League is run entirely by volunteers. Each year we solicit parents to volunteer in a variety of roles: snack bar duty, field maintenance, managing teams and coaching. Parents should accept the fact that they must shoulder responsibility and take initiative to make our local program successful. Little league is not a club in which membership implies baby-sitting benefits and entertainment privileges. Practically speaking, little league is an adult volunteer work project constructed, supervised and assisted by parents who desire to make its benefits extend to their children. Each parent should join in the total effort. There is a place and a job to do, for all. The burden of operating the league should not fall on a few. The parent who shirks this responsibility cannot, in turn, expect others to assume their burden.

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IF YOU WOULD LIKE TO SERVE ON ONE OF THE VOLUNTARY COMMITTEES LISTED BELOW, PLEASE CHECK THE APPROPRIATE BOX.

- OPENING DAY: Helping to organize all activities such as picture taking, parade and program during festivities;
- Parent Auxiliary;
- Manager\*: Minor league - no experience required; background checks will be conducted;
- Coach\*: no experience required in either the majors or minors; background checks will be conducted;
- FUNDRAISER: Assisting in distribution to teams.
- COMPLEX MAINTENANCE: Assist in making repairs at complex, when needed.

**\* For Parents who would like to apply to volunteer for Team Manager or Coach, it's a little more involved than signing up for a two hour slot at the snack bar.** The Little League® manager and coaches must be leaders. All must recognize that they hold a position of trust and responsibility in a program that deals with a sensitive and formative period of a child's development. It is required that the manager and coach have understanding, patience and the capacity to work with children. The manager and coach should be able to inspire respect. Above all else, managers and coaches must realize that they are helping to shape the physical, mental and emotional development of young people. While an adult with training and background in the game is a desirable candidate for manager or coach, league screening committees look for other important qualities. Screening of managers, coaches and others at the local league level who have contact with children is also important in attempting to discover those with a history of child abuse. Anyone interested in being a Little League manager or coach should contact us and be willing to undergo a screening process that will include a background check. Each year, the president selects and appoints the managers and coaches. As such, no person becomes a manager or coach without the approval of the president. All appointments are subject to final approval by the local league's board of directors. No manager or coach is guaranteed to be appointed each year.

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PLEASE PRINT FULL NAME OF THE CHILD: \_\_\_\_\_

I have read the above and understand my responsibilities to the Piscataway Township Little League.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please mail to:

Piscataway Little League  
P.O. Box 452  
Piscataway, NJ 08854