



EAST ORANGE COUNTY LITTLE LEAGUE CHALLENGER DIVISION REGISTRATION FORM

Player Information

Player's Name			· · · · · · · · · · · · · · · · · · ·				
Birth Date	th Date Age (p			lease circle) Male / Female			
Address	City			_ State	Zip		
Does the player require the ι	use of a buddy?	Yes / No					
Does the player use any ada	ptive equipment	(ex: wheelchair	r, walker,	hearing aid, et	tc.)? Yes / No		
If yes, please describe:							
How does the player commu	nicate? Spee	ech Sign	Non	-verbal			
Other							
Please list any physical and/diagnosis/limitations/conditioneeded)	ns/precautions c	or behavioral co	ncerns. (Use back of fo	orm for more space i		
Shirt Size (circle one) YS Will player wear a team base			AXL A	2XL			
	Parent/G	uardian Info	ormatio	n			
Parent Name		_ Email addre	ess				
Phone/Cell/Text Contact for	Rainouts & Anno	ouncements:					
arent Name Email address							
Phone/Cell/Text Contact for	Rainouts & Anno	ouncements:					
Questions about the Challe	nger division, ga	ames, schedule	e, equipm	ent used, unit	forms, etc contac		

C.J. Gross at 540-526-4248 or by email at challenger@eastorangelittleleague.com.

Parents/volunteers are always needed to help with running this volunteer operated organization between coaching, concessions, fundraising, field maintenance, etc. All are welcome and appreciated. This is a free program sponsored by E.O.C.L.L. and funded by donations and sponsorships. If you or anyone you know would be interested in helping continue to fund this program, please make checks payable to "East Orange County Little League" & mail to E.O.C.L.L. c/o Challenger Division, 31049 Old Plank Rd, Mine Run, VA. 22508. Questions about donating, sponsoring or payments accepted - contact treasurer@eastorangelittleleague.com.