



# LITTLE LEAGUE® BASEBALL AND SOFTBALL

## Tournament Player Verification

Baseball

Softball

Date Requested \_\_\_\_\_

League Name \_\_\_\_\_ League ID # \_\_\_\_\_

### Player Information and Documentation

Player Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

(Must be name as shown on the birth documentation)

Type of Age Proof (Original must be presented and copy must be attached)

- Board of Health/Registrar of Vital Statistics
- Federal/Military
- In-Lieu Statement (necessary document from all four groups)

Address of Parent or Legal Guardian

Street Address	City	State	Zip Code
----------------	------	-------	----------

**Residency Proof** (If residence changes to outside the league boundaries, a Regulation II(d) form must be prepared and attached to this form. If player has written approval via the Charter Committee of Williamsport, Pennsylvania, attach copy of written approval to this form.)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Driver's License           | <input type="checkbox"/> Local (Municipal) Records | <input type="checkbox"/> Medical Records                      |
| <input type="checkbox"/> Voter's Registration       | <input type="checkbox"/> Support Payment Records   | <input type="checkbox"/> Military Records                     |
| <input type="checkbox"/> School Records             | <input type="checkbox"/> Homeowner/Tenant Records  | <input type="checkbox"/> Internet, Cable or Satellite Records |
| <input type="checkbox"/> Welfare/Child Care Records | <input type="checkbox"/> Utility Bills             | <input type="checkbox"/> Vehicle Records                      |
| <input type="checkbox"/> Federal Records            | <input type="checkbox"/> Financial Records         | <input type="checkbox"/> Employment Records                   |
| <input type="checkbox"/> State Records              | <input type="checkbox"/> Insurance Documents       |   |

**(All documentation must be attached to this form)**

### Verification

**Parent or Legal Guardian Agreement:** By my signature below, I certify that all the information provided for this Tournament Player Verification is true and correct and provides the necessary documentation required by Little League to verify league/tournament age and residence eligibility. If the Charter/Tournament Committee subsequently finds that the information submitted as acceptable documentation regarding league/tournament age and residence eligibility 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.

Name (Printed) of Parent/Guardian	Signature of Parent/Guardian	Date
-----------------------------------	------------------------------	------

**League President's Verification:** I have reviewed and verified that the information presented here is true and correct and provides the necessary documentation required by Little League to verify league/tournament age and residence eligibility. If the Charter/Tournament Committee subsequently finds that the information submitted as acceptable documentation regarding league/tournament age and residence eligibility 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 suspensions and/or terminations with Little League Baseball, Incorporated.

Name (Printed) of League President	Signature of League President	Date
------------------------------------	-------------------------------	------

**District Administrator's Verification:** I have reviewed the residency documentation and verified the players original birth certificate and the information presented here is true and correct and, to the best of my knowledge appears to be acceptable under Little League standards.

Name (Print) of District Administrator	Signature of District Administrator	Date
--	-------------------------------------	------

**NOTE:** This form and attached original documentation must be retained by the player's parent or legal guardian as well as a copy retained by the local league. It is recommended that the District Administrator also maintain a copy.