



**2019 ALL-STAR PLAYER APPLICATION**

(League Age's 9 – 12)

**APPLICATIONS DUE BY**

**Wednesday, MAY 22nd**

**No exceptions will be made for late applications.**

This is the All Star application for all eligible league-age 9-12 year old players. The application must be completed and returned to the Majors or Northmont Snack Bar in a SEALED envelope. The snack bar worker cannot answer any questions regarding All Stars.

Contact Player Agent Matt Mackay at fhllmatt@gmail.com or Victoria Hooker fhllvictoria@gmail.com with any questions.

PLAYERS WILL KEEP THEIR UNIFORM!! There is a per player cost for All Stars in every division. This fee covers the All Star uniform: jersey, pants, hat, socks, belt, and a practice jersey. The cost to families will not exceed \$150. At the end of the All Star season, players will keep all uniform items. There may be additional costs that are optional for each player/family such as pictures and additional FHLL All Star apparel.

**PROOF OF DOB and RESIDENCY/SCHOOL WAIVER WILL BE REQUIRED FOR ALL SELECTED PLAYERS. A SEPARATE NOTICE WILL BE SENT WITH DETAILS.**

**PLEASE PRINT LEGIBLY**

Player's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Player's DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ League Age: \_\_\_\_\_

Current Division/Current Team \_\_\_\_\_ / \_\_\_\_\_

Parents/Guardians Names: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

Email address(es): \_\_\_\_\_

I live within FHLL boundaries: \_\_\_\_ Yes \_\_\_\_ **No, but required waiver has been obtained and filed with President/Player Agent.**



## PLAYER AND PARENTS/GUARDIAN AGREEMENT

**PLAYER AND PARENTS/GUARDIAN AGREE TO THE FOLLOWING ALL STAR COMMITMENTS:**

*Each line must be initialed by both the player and parent/guardian:*

_____ Player Initials	_____ Parent Initials	I understand this is a commitment of up to 2 months. Very few teams make it past 4th of July, but I understand All Stars is my scheduled priority until All Stars is completed.
_____ Player Initials	_____ Parent Initials	I understand that if an All Star applicant is league age 11, they can be selected for either the 11-12 or 10-11 team; if an All Star applicant is league age 10, they can be selected for either the 10-11 or 9-10 team. Applicants cannot choose which team they prefer.
_____ Player Initials	_____ Parent Initials	I further understand that local travel time will be involved.
_____ Player Initials	_____ Parent Initials	I understand that regardless of playing time and position during the regular season, I will be expected to play whatever position the manager assigns to me.
_____ Player Initials	_____ Parent Initials	I understand that substitution rules are different than the regular season. It is possible that I may play only the minimum (1 at bat) each game.
_____ Player Initials	_____ Parent Initials	I understand the All-Star commitment to practices and games needs to be priority one. Missing games/practices is unacceptable and may be cause for dismissal.
_____ Player Initials	_____ Parent Initials	As a parent of an all star player, I will be responsible to work or pay for two snack bar shifts. I will work two snack bar shifts, or pay \$25 per shift. If I am the manager of a FHLL all star team, then our family will only be responsible for one snack bar shift. (Snack bar shifts will not conflict with your all star players games.
_____ Player Initials	_____ Parent Initials	I understand that if selected, I must provide an original birth certificate, 3 original proofs of residency dated AFTER February 1, 2019, or if out of boundaries, a current waiver. Failure to provide on the specified date may result in removal from the all star team.
_____ Player Initials	_____ Parent Initials	As a parent, I understand that I will be required to attend a parent meeting, after All Star teams are announced, to provide the following: <ul style="list-style-type: none"> <li>• Parent Initials</li> <li>• Proof of residency</li> <li>• Proof of age</li> </ul>

I further understand that once named as a player, a Little-Star player may be removed by a vote of the managers and/or FHLL Board if the player is not upholding the standards listed above. As the legal parent/guardian of the above-named child, I fully understand and agree to the commitment required and give my consent for my child to play on the Little-Star team if he/she is chosen as an Little-Star player.

\_\_\_\_\_  
Signature of Player

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



# ALL STAR PLAYER UNIFORM

PLAYER NAME \_\_\_\_\_

Please indicate the size required for each item. This will only be used if the player is selected. Please choose sizes wisely, as no returns or exchanges can be made.

*Please circle the appropriate size*

Uniform Item	Youth Sizes	Adult Sizes
Jersey Please indicate top 3 jersey numbers 1. 2. 3.	YS YM YL	AS AM AL
Pant Style (Mizuno Brand)	YS YM YL YXL Knicker Long Cuffed Long Open Bottom	AS AM AL Knicker Long Cuffed Long Open Bottom
Warm-up Jersey (T-Shirt Size)	YS YM YL	AS AM AL
Socks	Youth	Adult
Hat	XS/S (6 5/8-7)	S/M (7 -7 1/4) L/XL 7 3/8 - 7 5/8