



25 Route 31 South • Suite I • Pennington, NJ 08534

ILL PLAYER REGISTRATION

Player's Name: _____

Age: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Mobile Phone: _____

Player E-mail: _____

Parent/Guardian E-mail: _____

How did you hear about the ILL?: _____

Current Team: _____ Current Grade: _____

Position: _____ Jersey Size: _____

PAYMENT INFORMATION

Check #: _____

Received by 10/15: \$325.00

Received by 10/25: \$350.00

REGISTRATION CHECK LIST

Players must complete and submit all of the forms listed in order to play in the league:

- Registration Form
- Medical History and Consent Form
- ILL Player Conduct Form
- Waiver & Release of Liability Form

IT IS RECOMMENDED THAT TEAMS SUBMIT THE REGISTRATION FORMS AS A GROUP. PLAYERS LOOKING TO JOIN THE LEAGUE AS AN INDIVIDUAL MAY SUBMIT THE FORMS ON THEIR OWN.

PLEASE SUBMIT FORMS TO: **25 ROUTE 31 SOUTH**
SUITE I
PENNINGTON, NJ 08534