



PLAYER RELEASE FORM

Player Information

Last Name: _____ First Name: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Parent or Guardian Name: _____

Signature of Parent or Guardian: _____ Date: _____

Accepting Club or League Information

Name of Club or League Accepting Player: _____

Name of Team Accepting Player: _____

Name of Coach: _____ Phone #: _____

Signature of Coach _____

Age Group: _____ Date: _____

Releasing Club or League Information

Name of Club or League Releasing Player: _____

Name of Team Releasing Player: _____

Name of Coach _____ Phone # _____

Signature of Coach or Club Official _____ Title _____

____ Request for Release

____ Request for Involuntary Release (List Reason in Space Provided Below)

Signature of State Official Granting Approval: _____

Date: _____ Phone Number: _____

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