

Player Information

Last Name: F	irst Name:	Date of Birth:	
Street Address:			
City:State:_	Zip:	Phone #:	
Email:			
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:		Age Group:	
Name of Coach:		Email:	
Signature of Coach		Date:	
Releasing Club or League Information			
Name of Club or League Releasing Player:			
Name of Team Releasing Player:			
Name of Coach or Club Official:		_ Email :	
Signature of Coach or Club Official		Title: Da	ate:
Request for Release			
Request for Involuntary Release (List Reason in Space Provided Below)			
Signature of State Official Granting Approval:			
Date:	Email:		

COPIES TO: Accepting and Releasing Clubs