

HAAA

Player Request Release Form

PLAYER INFORMATION

Player's Name _____ Gender: (M)___ (F)___

Date of Birth _____ Players Age _____

Address _____ City _____ Zip _____

PARENT/GUARDIAN INFORMATION

Guardian/Father _____ | Guardian/Mother _____

Cell Phone/Alternate _____ | Cell Phone/Alternate _____

Email _____ | Email _____

I request a release from the following organization for which I played the following sport.

Organization

Sport

Age Group

Reason(s) for request:

Release approved for release to the following organization:

Organization

Sport

Releasing Organization Approval

Representative Signature

Date

Representative Name / Title

Phone Number

HAAA Reviewed

Signature _____

Date _____

If a participant in HAAA baseball/softball league wants to change organizations (by sport) from the previous season, a release from the previous organization is required. A player release request is to be made by a parent or guardian utilizing this form. If an organization refuses to grant a release, then the participant may appeal to the HAAA board.