

AMERICAN LEGION BASEBALL



Player Transfer Form #76

Please PRINT or TYPE

This form is to be used by players who have been cut and released by an American Legion team. Released players may be eligible to transfer

This form is to be initiated by the Losing Coach or Program

Permission is hereby requested for	<input type="text" value="Players Name"/> <small>Player's Full Name</small>	<input type="text" value="Players DOB"/> <small>Player's Date of Birth</small>
<input type="text" value="Legal Guardian's Permanent Residence"/> <small>Parent's Address, City, State, Zip</small>	<input type="text" value="Legal Guardian's Phone #"/> <small>Parent's Phone#</small>	
<input type="text" value="High School attended prior to March 31<sup>st</sup> of playing season"/> <small>Player's High School</small>	<input type="text" value="High School Enrollment"/> <small>High School Enrollment</small>	<input type="text" value="If team has accepted players from other HS's"/> <small>Team's Total Enrollment</small>

Player is hereby released from the following team	<input type="text" value="Name of losing/cut from team"/> <small>Name of Old Team (print/type)</small>
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<input type="text" value="Player must sign"/> <small>Player's Signature (Please print & sign)</small>
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If legal Guardian <input type="text" value="Court paperwork must also be submitted"/> <small>Parent's Signature (Please print & sign)</small>
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<input type="text" value="Name of team accepting player"/> <small>Name of NEW Team (print/type)</small>
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<input type="text" value="Printed name and signature of coach/manager/administrator of team that is releasing player"/> <small>Team Manager's Signature & Printed Name (old team)</small>
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<input type="text" value="Receiving team- OR - next team to be cut from"/> <small>Manager's Signature - Team 1 (Please print & sign)</small>	<input type="text" value="If needed - Receiving team- OR - next team to be cut from"/> <small>Manager's Signature - Team 2 (Please print & sign)</small>	<input type="text" value="If needed - Receiving team"/> <small>Manager's Signature - Team 3 (Please print & sign)</small>
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Send completed Form to:
Department Baseball Chairman Signature & date

American Legion
150 NW 40th Street, Unit A
Lincoln, NE 68528

This form must be filed with the National Form #1; team manager shall retain copy for his files.
This form shall be filed with department headquarters.

If transfer crosses a state border, both department chairmen must approve prior to placing player on Form #1.
<input type="text" value="Call me for contact info for this person"/> <small>Concurring Department Baseball Chairman</small>

High School Enrollment can be found at
http://www.legionbaseball.net/rules/forms/rules_&_forms.htm