

PLAYER CHANGE FORM

TEAM NUMBER: \_\_\_\_\_ TEAM NAME: \_\_\_\_\_

NEW PLAYER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PLAYER BEING DROPPED: \_\_\_\_\_

If the new player puts the team over 6 players one must be dropped.

Must get approval from the league president before new player can play.

Player fees must be included with this form.

DATE: \_\_\_\_\_ CAPTAIN SIGNATURE: \_\_\_\_\_

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