

Dixie Softball, Inc. Official Player Release

Date _____

League Name City/State S- Franchise Number

Player's Full Name: _____ Birth Date: _____

Pursuant to DSI Regulation V, we request that the following player be unconditionally released to play in another DSI boundary for the following reason(s):

_____ The player registered or attempted to register with our league but was not assigned to a team.

_____ Other: _____

We understand that upon approval this player shall be eligible to register with another DSI league and play outside the boundary of her home league. If she successfully registers with a league in another boundary, she must remain with the new league for the remaining years of her DSI eligibility unless she moves into the boundary of another league. We also understand that this player shall be eligible for tournament play in the new league only if this release is properly executed and sent to the District Director/State Director for approval prior to **MAY 1** of the current season. Players who have not obtained a proper release shall be ineligible for tournament play.

Parent or Legal Guardian's Signature League President's Signature

Parent or Legal Guardian's Name (Please Print) League President's Name (Please Print)

Street Address Address

City, State and Zip Code City, State and Zip Code

This request for a league release is:

APPROVED

NOT APPROVED (For the following reason)

District Director's Signature State Director's Signature

(Unless this release is signed by both the District and State Director it is invalid.)

Original Copy - State Director
Please make Xerox Copies for the League President and District Director