

**CHESTERFIELD
BASEBALL CLUBS INC.
RELEASE FORM**

(PLAYERS NAME)

(CBC CONTROL NUMBER)

REQUEST THAT HE/SHE BE RELEASED FROM

(HOME ASSOCIATION) TO PLAY THIS SEASON AT _____
(NEW ASSOCIATION)

RECOMMENDED LEAGUE

ASSOC. PLAYED LAST YEAR

REASON FOR GENERAL RELEASE:

NUMBER OF PLAYER IN THIS AGE BRACKET FROM RELEASING ASSOC. _____

NUMBER OF PLAYER IN THIS AGE BRACKET FROM RECEIVING ASSOC. _____

APPROVAL SIGNATURES

(RELEASING ASSOCIATION)

(RECEIVING ASSOCIATION)

DATE: ____/____/____

BASEBALL COMMISSIONER

(APPROVED)

(DISAPPROVED)

DATE: ____/____/____

COMMENTS:

EXECUTIVE BOARD

(APPROVED)

(DISAPPROVED)

DATE: ____/____/____

ASSOCIATION ASSIGNED BY COMMISSIONER: _____

LEAGUE ASSIGNED BY COMMISSIONER: _____