

TNT Baseball Association Request for Transfer/Release

Player Information	on:					
Player Name:			Birth Date:			
Address (Street, City, Province, Postal Code)						
Parent name and email						
Was the player releas	sed last season	from	their hon	ne ass	ociation?	☐ Yes☐ No
Do they have a curre	nt release from	their	home ass	ociatio	on? 🗆 Ye	s 🗆 No
Please attach a copy(s) of relative A request for release will not		required	d documenta	tion is ob		
Home Local Association	LEVEL OF PLA HL/SELECT/RE	_	Most Red Team		Most Recent Division	
TRYOUTS	DATE	TE	TEAM		LOCATION	HEAD COACH
ATTENDED CURRENT						
YFAR						
	m in Current Age	e Gro	up			ed level
No team in my Local Association at Current Age Group at desired level Please provide reason for Request:						
	·					
If player is under 18 y player may sign.	ears of age/Par	ent/G	uardian r	nust si	gn below, oth	nerwise the
Parent Name:			Signature:			
Data			Phone Number:			
Date: Phor				Number.		
	FOR TN	ITBA	USE OI	NLY		
Player/Parent Contacted Yes No				Date:		
Release Granted: Yes No				Date:		
Parent/PlayerContacted: Yes No				Date:		
Release Sent to Player/Parent: Yes No				Date:		
President Signature:				Date:		