AMERICAN LEGION BASEBALL

2017 Player Transfer AL-76



Please PRINT or TYPE

This form is to be used by players who have been cut and released by a Legion team and may be eligible for transfer. All parties involved understand that this transfer is valid from January 1 thru December 31 of current season only. All parties understand that the Department Baseball Chairman must approve this transfer prior to placing player on the Registration Form #1.

Permission to transfer is requested	d by: Full Name of Player
	Full Name of Flayer
Parent's Addres	s, City, State, Zip & Phone Player's Date of Birth
P	ayer's School
Player is hereby released and traffollowing team:	nsferred to the
REASON FOR REQUEST:	
	Player's Signature
	Parent's Signature
	Team Manager's Signature (OLD TEAM)
	Regional Director's Signature

Department Baseball Chairman Signature and Date

ORIGINAL MUST ACCOMPANY FORM #1