



Date: _____

SANDLOT FRANCHISE

This is to Certify that the

_____ is a member of the Pennsylvania American Baseball Program, having organized a baseball team, according to the established rules and procedures of The American Legion, Department of Pennsylvania rules and the _____ league rules.

CERTIFICATE OF SANCTION for:

_____	_____	_____	_____
Team Name	Location	Post #	Region

is granted subject to the following conditions:

1. **The Director of Activities shall have the authority, with the right of appeal to the Department Activities Committee of The American Legion, to withdraw the sanction for just cause by giving written notice to the president of the league as indicated by the files in the Department Headquarters at PO Box 2324, Harrisburg, PA 17105.**
2. **Sanction does not imply that in future seasons a new team cannot make application for operation within a portion of the present boundaries of the league. Other teams may make application through the league president, and if the league permits a franchise, it shall be granted.**
3. **This sanction shall be in effect until the league or Department sees fit to cancel this franchise, or if the team itself decides to forfeit same.**

Secretary or President of League

Director of Activities

Business Manager or Post Adjutant

Regional Director