

# AMERICAN LEGION SOFTBALL



## Team Declaration Form #77

**Please PRINT or TYPE**

This form is to be used by players who may have an option to:

1. Play for the American Legion Softball team nearest parent's or court-ordered guardian's legal domicile OR
2. Play for the team nearest the school the player attends.

Authorization for this choice is outlined under Rule 3D of American Legion Softball Rules. See American Legion Rule Book for further clarification.

Player's name (print or type)

Parent's address (print or type)

Phone number

I declare I am eligible under the Wisconsin American Legion Softball Rule 4.D to play for:

Name of American Legion team and sponsoring American Legion post number

Team's base school and enrollment

Player's high school and enrollment

My parents and I understand that this declaration shall be valid from January 1 to December 31 of the current season only.

Player's signature (print and sign)

Parent's signature (print and sign)

Team manager's signature and printed name (print and sign)

- The department chairman must approve this form prior to online registration placing the player on the form.
- To determine the next team, The American Legion shall use MapQuest ([www.mapquest.com](http://www.mapquest.com)). The shortest driving distance between the parent's domicile and/or the player's base school(s) shall determine the closest team.

Signature of Department Softball chairman

Date

**Team manager shall retain a copy for his files.  
Second copy shall be filed with the department office.**