

Request and Consent Form to Play Up Guidelines:

Players are encouraged and placed at their level for age, playing up in a division is defined as; a player playing in a higher division than what their age would assign them to. Such a request requires that this consent form be filled out and submitted to Lubbock Youth Softball by the parent/guardian of the player for consideration prior to Try Outs, and it does not guarantee placement.

Player Name:	D.O.B:
Age on 8/31 current year	
exception to normal play move up to the 13-14-ye 14-year-old age division, approved, the player mu remainder of that season	It to play-up will be considered on a case-by-case basis and will be treated as an er assignment policy. (Example: A player who is 12 years old may be considered for re-old age division. A child who is 11 years of age may NOT move up to play in the 13-as moving up more than one age group is not allowed.) Once the request is st remain in that division and will not be allowed to move back down for the , to include any all-star play. By signing and submitting the form below, as the n, you are acknowledging the potential danger and accepting responsibility for any cayer.
Parent Initials:	Parent 2 Initials:
Consent:	
up if selected in the players at that level are l mature in general. By sig any injuries or damage n for all injuries, medical e associated with playing	, request and give consent for my child named above, to try out and play Division. I do understand the inherent risks of playing up an age division, as the kely to be more skillful in the fundamentals of softball and be all around more ning this Consent Form, I certify that I will not hold Lubbock Youth Softball liable for y child suffers while playing in the higher age group. I will assume full responsibility openses, or damages that may occur to my child, because of such inherent risk up in a higher age division if selected, furthermore I agree to release and hold both Softball Board, its facilities, and members for any injuries sustained.
Parent or Guardian's	
Signature:	Date:
Phone:	Address:
Parent or Guardian's Prir	ted Name:
League President Signat	rre:Date:
Approved or Denied Not	s: