

2020 Softball Roster Additions and Deletions Request

Team Name: _____

League: _____

Division: _____

Additions:

Name	Age	Address	Telephone

Deletions:

Name	Age	Address	Telephone

The reason for this change in my roster is:

Changes made by: _____

Signature of Manager

Date

FOR OFFICE USE ONLY:

Approved: _____

Superintendent of Public Works

Date

Sports Supervisor

Date