

NEW ZEALAND SOFTBALL ASSOCIATION INC

"PICK-UP" AUTHORISATION FORM

This form is to confirm that the parties concerned have agreed to the player participating in

_____ Tournament
for a team OTHER THAN his/her Parent Club or Association. Once signed it remains in
force until the end of the stated Tournament.

Player Name: _____
Please print

Signature: _____ Date: _____

Parent Club Name: _____
Please print

Secretary: _____ Date: _____
Please sign

Parent Association _____
Please print

Secretary: _____ Date: _____
Please sign

"Pick Up" Club _____
Please print

Secretary: _____ Date: _____
Please sign

"Pick Up" Association _____
Please print

Secretary: _____ Date: _____
Please sign

Tournament Liaison Officer: _____ Date: _____

To be presented to Tournament Liaison Officer
no later than Managers Meeting of stated Tournament.

FOR INTERCLUB TOURNAMENTS
BOTH CLUB & ASSOCIATION SECRETARIES MUST SIGN