



# SPECIALLY AFFILIATED PLAYERS LIST

AFFILIATION LIST FOR: \_\_\_\_\_ (TEAM NAME)

DIVISION: \_\_\_\_\_ (i.e. Bantam, Midget)

CATEGORY: \_\_\_\_\_ (i.e. AA, A, B, etc.)

\*The Final Date to request affiliations is January 15<sup>th</sup>.

	SURNAME	GIVEN NAME	BIRTH DATE M / D / Y	TEAM REGISTERED WITH	DIVISION	CATEGORY	APPROVED BY (President Signature)
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<b>SIGNATURE OF TEAMS REQUESTING AFFILIATION</b>							
<b>Association President:</b> (Please Print) _____ Telephone: _____ Signature: _____							
<b>HNO APPROVAL:</b> _____						<b>DATE APPROVED:</b> _____	