

TO: Oak Grove Little League Board of Directors
FROM: _____
(Print Name of Parent/Guardian)
DATE: _____
(Print Name of Parent/Guardian)
SUBJECT: Waiver for High School Play for _____
(Print Name of Player)

Please accept this request for a waiver from tryouts for _____.
(Print Name of Player)
He is currently in tryouts for _____ High School. Should you need
(Print Name of High School)
verification, please contact _____,
(Print Name of Coach) (Print Name of High School)
High School's Head Coach.

Thank you.

Signature of Parent/Guardian