2015 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