

WKBSA Request for Player Release (Submitted by Parent/Guardian)

Date:	Player Name:	Age Division:	Boys or Girls
Parent/Guardian Name:		Phone #:	
Current Team Name and WKBSA Area:		*Current Head Coach Name:	

- Current Head Coach is the person that is the official head coach at the time of this document being approved/denied by the Head Coach, Area President (or designee) or the WKBSA.

A. Request & Reason Section:

I request the release of the player from the above listed team for the following reason(s).

- I have moved to a different location and seek to play in the area I am now living in. Requires Head Coach and current area President or designee approval.
- Personality conflict or situation with Head Coach or Assistant Coach in which all parties mutually agree it is in best interest of the player to relocate to a different team. Requires Head Coach and current area President or designee approval.
- Technical competence or concern for instructional ability/knowledge of the game. Requires Head Coach, current area President or designee and WKBSA approval with explanation/examples of the concerns/issues in comment section.
- Other compelling reason not listed above. Requires Head Coach, current area President or designee and WKBSA approval with explanation/examples of the concerns/issues in comment section.

B. Comment Section:

C. Review and Approval Section:

The Head Coach has the right, by rule, to deny any request for release. In such cases where the Head Coach denies a release, the player will remain on the team of record unless the parents/guardians appeal to the WKBSA Board for relief.

By signing this form, I acknowledge that I have read and understand the WKBSA player release process, and I agree to follow the guidelines established by the WKBSA concerning player registration, player releases and WKBSA rules and policies for assignment of released players to a new team.

Parent/ Guardian	Signature:		
Head Coach	<input type="checkbox"/> Approve	<input type="checkbox"/> Denied	Signature:
Area President or designee	<input type="checkbox"/> Approve	<input type="checkbox"/> Denied	Signature:
WKBSA Representative	<input type="checkbox"/> Approve	<input type="checkbox"/> Denied	<input type="checkbox"/> N/A
			Signature:

This form is to be kept by the Area President and a copy sent to the WKBSA upon request.