

**WEST VALLEY GIRL'S SOFTBALL**  
**Special Request Form**  
Appendix 'D'

Please fill in all the applicable information below. Please be as complete with your information as possible. The league tries to honor all legitimate special requests; however, there is no Guarantee.

Player's Name: \_\_\_\_\_

Please circle the appropriate division:

T-Ball 6&U Micro 8&U Mini 10&U Minor 12& U Major 14&U H/S Women's

Special request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Parent / Guardian

\_\_\_\_\_  
Date (xx/xx/xxxx)

\_\_\_\_\_  
Print Parent / Guardian Name

In the event we need to discuss this request, please provide the following information.

Telephone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Best Phone #: \_\_\_\_\_

Best time to call: \_\_\_\_\_

This information on this form will remain **CONFIDENTIAL**