



APPLICATION FOR COMBINED TEAMS REGULAR SEASON PLAY

Leagues applying for combined teams play must complete this application and forward it to the District Administrator

NOTE: Use a separate form for each level of play



State _____

District _____



Level

- | | |
|---|---|
| <input type="checkbox"/> Minor League Baseball | <input type="checkbox"/> Minor League Softball |
| <input type="checkbox"/> 9/10 Baseball | <input type="checkbox"/> 9/10 Softball |
| <input type="checkbox"/> 10/11 Baseball | <input type="checkbox"/> 10/11 Softball |
| <input type="checkbox"/> Little League Baseball | <input type="checkbox"/> Little League Softball |
| <input type="checkbox"/> Junior League Baseball | <input type="checkbox"/> Junior League Softball |
| <input type="checkbox"/> Senior League Baseball | <input type="checkbox"/> Senior League Softball |
| <input type="checkbox"/> Big League Baseball | <input type="checkbox"/> Big League Softball |
| <input type="checkbox"/> Challenger | |



All leagues involved in combined play:

Total players for each age in appropriate division indicated

League Name/ League ID No.	Population	# of Players	President's Signature	7/8	9/10	11	12	13	14	15	16	17	18
1.													
2.													
3.													
4.													



This combination is requested for tournament play: Yes No



Forward to District Administrator



Identify Leagues above involved in combination for tournament:



Each league must charter.

- 1.
- 2.
- 3.
- 4.

I have reviewed the application for combined teams and recommend approval based on the information provided.

District Administrator

State/District

Date

Forward completed application to Regional Director for approval if tournament combination is requested.

Regional Director

Date