

Austintown Girls Softball League (AGSL)
Division Change Request Waiver Form

I (parent's name) _____ DO NOT wish for
my child (child's name) _____ to play in the
(circle one) Instructional / Junior / Senior Division. I therefore request for my child to play in the
(circle one) Instructional / Junior / Senior Division.

I understand the division ages are set by the League with safety being the main concern. I understand that my child playing in a different division, could be placing my child into a possible safety risk, and this decision is strictly my own.

I agree to hold harmless the Austintown Girls Softball League, it's Board of Directors, coaches and any other party affiliated with the League or its sponsorship of the League by making this decision. I also understand if I'm requesting to keep my child at a lower level, but my child's ability to play exceeds the level of play for a younger division level, I may be required to move my child up to a higher division and this request can be revoked.

Parent Name (Printed)

Parent Signature

Date