

**NORTH STAFFS JUNIOR YOUTH LEAGUE  
(PART OF STAFFORDSHIRE LADSANDADS CLUB)**

JYL 07. (16/17)

**PLAYER RELEASE FORM**

**PLAYERS NAME**.....

**CURRENT TEAM**.....**U.....'s BRANCH**.....

**SECTION 1: TO BE COMPLETED BY PARENT/GUARDIAN & PLAYER**

Has the player been approached to play for another N Staffs Junior Youth League Team? YES / NO. If 'YES' please give details.....

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Does the player wish to remain with the same, or another Branch of Ladsandads? YES / NO. If yes please state Branch.....

Is the player joining a Team outside North Staffs Junior Youth League YES / NO

If 'YES' please give details.....

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Why does the player want to leave his Team?.....

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We can confirm that the above details are correct and request the player is released from his current Team. We understand that, if the player is released and is remaining within Ladsandads, he will be added to the Pool system if it exists and allocated another Team by the relevant Branch Committee when a place becomes available.

Player's Signature.....Date.....

Parent's/Guardian's Signature.....Date.....

**SECTION 2: TO BE COMPLETED BY TEAM MANAGER AND SECRETARY.**

Do you agree to this player's release? YES/NO

If 'NO', please give your reasons:.....

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Manager's Signature.....Date.....

Secretary's Signature.....Date.....

**SECTION 3: BRANCH APPROVAL**

Does the Branch agree to this player's release? YES/NO

Branch Fixture Secretary's  
Signature.....Date.....

**SECTION 4: FOR COMMITTEE USE ONLY**

Release Approved? YES/NO

League Registration Secretary.....Date.....