

Date:

To: Ingram Little League
P.O. Box 101
Ingram, TX 78025
Charter #3432617

President: James B. Craft

To whom it may concern,

We are officially requesting that our child _____,
age _____, DOB _____,
be authorized a lifetime waiver to play regular season & Tournament Play for
_____ Little League in _____, Texas.

The reason we are applying for this waiver is:

Should you have any questions please contact me at:

Parent Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

Signature: _____