



Injured Player Release



Player's Name:

Player's Birthday:

Player's Email:

Current Team:

Current League:

Injury:

Date of Injury:

Date Submitted:

Please complete form and email to: staff@cscindoor.com or drop off at Creekside.

Forms must be submitted for approval 24 hours BEFORE the start of the 6th in order to add a replacement player to the roster.

Staff Only	
Date Submitted:	Staff Initials:
Date Approved:	Staff Initials:
Team Manager Notified:	