



## DRAW REQUEST FORM

This form to be completed and in the hands of the Convener by 9:00am of the Monday morning prior to Saturday game day. All sections are to be completed. **ONE FORM per week will be accepted by the Club Contact ONLY.** Please complete and email to [admin@southlandsoftball.co.nz](mailto:admin@southlandsoftball.co.nz)

Full Team name e.g. (ILT Dodgers Eagles)

Grade

Draw request

Reason - Request more likely to be actioned if there are three or more players (including coaching/management staff) unavailable due to softball related reasons e.g. – tournament

Please list the players/Coaches/Managers involved

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