



SOFTBALL NEW ZEALAND

# PICK-UP AUTHORISATION FORM

FOR MENS/WOMEN'S OPEN CLUB NATIONALS

This form is to confirm that the parties concerned have agreed to the player participating in the MENS / WOMENS Open Club Nationals Tournament for a team OTHER THAN their Parent Club.

Once signed it remains in force until the end of the stated Tournament.

**Please Note:** Athletes must have been registered as a representative player within their own club team first. Athletes cannot remove themselves from their registered club team, then be selected by an outside ('pick up') club.

ATHLETE INFORMATION	
Full Name: _____	
Date of Birth: ____ / ____ / ____	Registered Club: _____
Signature: _____	Date: ____ / ____ / ____
PARENT (REGISTERED) CLUB	
The _____ Softball Club clear the athlete above to be "picked" up as a representative for the Open Club National Championship for the club mentioned below.	
Club Secretary: _____ <small>(SIGNATURE)</small>	Date: ____ / ____ / ____
"PICK-UP" CLUB	
The _____ Softball Club agree to the athlete above being "picked" up as a representative for the Open Club National Championship.	
Club Chairman / Secretary: _____ <small>(SIGNATURE)</small>	Date: ____ / ____ / ____
PARENT (REGISTERED) ASSOCIATION	
The _____ Softball Association clear the athlete above to be "picked" up as a representative for the mentioned Association and National Tournament.	
Association Representative: _____ <small>(SIGNATURE)</small>	Date: ____ / ____ / ____
SOFTBALL NEW ZEALAND	
SNZ Tournament Representative: _____ <small>(SIGNATURE)</small>	Date: ____ / ____ / ____

Must be presented to the Softball NZ Tournament Representative no later than Managers Meeting of stated Tournament. Forms can be emailed to [arussell@softball.org.nz](mailto:arussell@softball.org.nz) for prior approval.