



DELCO SCHOOL LEAGUE
ELIGIBILITY PETITION

DATE SUBMITTED: _____

PLAYER'S FULL NAME: _____

BIRTH DATE: _____ GRADE: _____

SCHOOL ATTENDING: _____

REQUESTING CLUB: _____

REQUESTING TEAM (LEVEL): _____

TRAVEL TEAM AND LEVEL: _____

EXPLANATION: _____

DECISION: _____

SIGNED: _____

DATE: _____