



P.O. Box 74177
RPO Strathcona
Calgary, Alberta T3H 3B6
Email: byron.stephen12@gmail.com
Website: www.cwfa.ca

CWFA 2018 Pickup Player (“PU”) Attestation

Date: _____

I hereby certify and attest that I am registered with and on the roster of the softball team noted below and thus affiliated with Softball Alberta.

Player Name (print): _____

Signature: _____

Registered Team: _____

Category: _____

League: _____

I hereby certify that I have asked the above player to play as a pickup player (PU) on my team on the above date in order to avoid forfeiture of one or more games in the CWFA League. I believe that the above player is indeed registered with and on the roster of the softball team noted above, and is thus affiliated with Softball Alberta.

Date: _____

Coach Name (print): _____

Signature: _____

Team: _____

Category: _____

CWFA Division: _____

Opposition Team: _____