



Calgary Women's Fastpitch Ass.
P.O. Box 74177 RPO Strathcona
Calgary , AB T3H 3B6
E-mail: byron.stephen12@gmail.com
[website: www.cwfa.ca](http://www.cwfa.ca)

2019 AUTHORIZATION TO RELEASE INFORMATION

I, _____, a representative of the _____ a team associated with the Calgary Women's Fastpitch Association, hereby authorize the Calgary Women's Fastpitch Association to utilize the information noted below for the purpose of creating a contact list for it's member teams.

I further authorize the release of this information by the Calgary Women's Softball Association to other members of the association and affiliated bodies, including but not limiting to Softball Alberta, and Softball Calgary, for the purposes of facilitating contact of member teams.

TEAM NAME: _____

REPRESENTATIVES NAME: _____

POSITION WITH TEAM: _____

MAILING ADDRESS: _____

TELEPHONE NUMBER: _____

CELL NUMBER: _____

E-MAIL ADDRESS _____

ALT. E-MAIL ADDRESS _____

Dated at the City of Calgary, in the Province of Alberta this _____ day in January, in the year 2019.

This authorization expires in 12 months after the date noted above.

Signature of Releaser

Signature of Witness

Witness Name

Witness Phone Number