



2019-20 ADHSHL LETTER OF INTENT

TEAM: _____

PLAYER NAME: _____

STREET ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

PARENT'S NAME(S): _____

PRIMARY PHONE NUMBER(S): _____

EMAIL ADDRESS: _____

WHAT SCHOOL WILL YOU ATTEND IN 2019-20: _____

DATE PLAYER SIGNED TO TEAM: _____

By my/our signature on this Letter of Intent, I/we acknowledge and agree to the following:

- The player referenced on this Letter of Intent has committed to participation with this 2019-20 ADHSHL Team:
- **TEAM:** _____
- I/We agree to complete the ADHSHL payment and registration process on behalf of the player referenced on this Letter of Intent during the time frame set forth by the ADHSHL.
- I/We understand that the player referenced on this Letter of Intent will not be considered as registered and eligible to participate with this team until which time the ADHSHL payment and registration process has been completed and all registration requirements have been met. *(non-sponsored teams will pay fees through the school not the ADHSHL)*

Print Name of Parent / Legal Guardian

Print Name of Parent / Legal Guardian

Signature of Parent / Legal Guardian

Signature of Parent / Legal Guardian

Date