



**YOUTH ASSOCIATION OF NORTH EAST PENSACOLA**

**2025 SPRING PLAYER FREEZE FORM**

***SPORTSMANSHIP \* TEAMWORK \* INTEGRITY \* COMMITMENT***

Team Name : \_\_\_\_\_ Head Coach Name : \_\_\_\_\_

Commissioner Name: \_\_\_\_\_

***\*Please mark the selected division of the frozen players below\****

<input type="checkbox"/> TBall (7)	<input type="checkbox"/> 6U Softball / Tee (6)
<input type="checkbox"/> Coach Pitch (7)	<input type="checkbox"/> 8U Softball (6)
<input type="checkbox"/> Minors (7)	<input type="checkbox"/> 10U Softball (6)
<input type="checkbox"/> Majors (8)	<input type="checkbox"/> 12U Softball (6)
<input type="checkbox"/> Juniors (9)	<input type="checkbox"/> 16U Softball (6)

**ALL PLAYERS MUST BE REGISTERED ONLINE PRIOR TO SUBMITTING FREEZE FORM**

Player Name	Parent Signature/Date	Player Registered Online?
1.		<input type="checkbox"/>
2.		<input type="checkbox"/>
3.		<input type="checkbox"/>
4.		<input type="checkbox"/>
5.		<input type="checkbox"/>
6.		<input type="checkbox"/>
7.		<input type="checkbox"/>
8.		<input type="checkbox"/>
9.		<input type="checkbox"/>

**NEP BOARD USE ONLY**

Date Submitted: \_\_\_\_\_ Received by: \_\_\_\_\_

Approved by (Must be commissioner) : \_\_\_\_\_ Website Updated : \_\_\_\_\_