MINNNESOTA BASEBALL ASSOCIATION, INC. (PRO-PLAYER QUESTIONNAIRE) (PAGE 1)

- Must be completed by any player returning from a professional team.
 Player must attach a written release from professional team for which he played.
- 3. Must be sent to State Board secretary for action.4. Player may not play until action taken by State Board secretary and notified of the action, State Board may act on Questionnaire.

| Type or print information in detail. | | |
|---|--|--|
| Date: | | |
| Name of playerAddress on date of questionnaire | | |
| Address on date of questionna | Talanhana | |
| City | _1 elephone | |
| Date of birth | Married/Single | |
| Information for current seas | son . | |
| 1. Address on March 15, of the | | |
| | Address of Employer | |
| 3. Date first employed | | |
| 4. Name& address of parent/gr | uardian | |
| 5. Name of teams that player i | s eligible to play with, and driving distance to each | |
| | y limits, name city | |
| 7. If located in rural area, give exact location and distance to nearest city | | |
| 8. Does city (in 47) have a team | m in the MBA | |
| 9. Reason for wanting to play | with new team | |
| | school and date graduated | |
| 11. If college student, name so | chool and expected grad date | |
| Address on March 15 of last v | ear | |
| Occupation | earAddress of Employer | |
| Date first | t employed | |
| Played with tea | m of league | |
| Released by this team on | m ofleague. | |
| recleased by this team on | | |
| Information for previous sea | son (two years from present season) | |
| 1. Address on March 15 of year | ar | |
| 2. Occupation | arAddress of employer | |
| 3. Date first employed | | |
| 4. Played with | team ofleague | |
| 5. Released by this team on | by | |
| I, the player 'in question on thi | team ofleagueleagueleagueles form certify that the information I have given is correct | |
| and that I feel that I am eligibl | e to play with of the | |
| league for the | season under the following | |
| rules of the MBA: | | |
| | | |
| Signed | Address | |

PRO-PLAYER QUESTIONNAIRE) (PAGE 2

| STATE BOARD | |
|---|---------------------------------|
| ACTION ON THE ABOVE TAKE AT A DULY CALLED MEE | TING OF THE STATE BOARD HELD ON |
| AT | |
| PLAYER IS APPROVED / DISAPPROVED FOR THE | SEASON. |
| LEAGUE ATTENTION: MAKE OUT IN DUPLICATE. COPY ILL BE RETURNED AFTER STATE ACTION. | |
| (STATE SECRETARY) | |