

**LMBA MANAGER FREEZE PERMISSION FORM**  
*Must be Submitted to Division Commissioner or Other Board Member by  
August 18, 2019 at 5 pm (ALL DIVISIONS)*

DATE: \_\_\_\_\_

Junior / Senior  
CIRCLE ONE

DIVISION: Foal / Shetland / Pinto / Mustang / Bronco / Pony / Colt  
CIRCLE ONE

I GIVE PERMISSION FOR: \_\_\_\_\_  
MANAGERS NAME

TO FREEZE MY CHILD: \_\_\_\_\_  
PLAYERS NAME / DATE OF BIRTH

FOR THE \_\_\_\_\_ SPRING SEASON / WINTER SEASON.  
YEAR CIRCLE ONE

**I UNDERSTAND THAT IF THE ABOVE MANAGER IS NOT GIVEN A TEAM, I WILL BE NOTIFIED AND, MY CHILD WILL PARTICIPATE IN THE MANDATORY EVALUATIONS AND MY CHILD WILL BE PLACED IN THE OPEN DRAFT AS PER THE LMBA LEAGUE RULES.**

DATE: \_\_\_\_\_

\_\_\_\_\_  
PARENT / GAURDIAN SIGNATURE

**I UNDERSTAND THAT THIS DOES NOT GUARANTEE THAT I WILL BE RATIFIED AND/OR SELECTED AS A TEAM MAANGER. IF SELECTED AS A MANAGER, I AM ELECTING TO FREEZE THE PLAYER REFERENCED IN THIS FREEZE FORM.**

DATE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PROPOSED MANAGER

Do not write in area below

BOARD APPROVAL: YES / NO	Junior / Senior
MANAGER SELECTED: YES / NO	
COMMENTS: _____	
_____	
_____	
DIVISION COMMISIONEER: _____	DATE: _____