



PROPOSED RULE CHANGE

Thank you for requesting a proposed rule change. We kindly ask that you provide the following details so our request may be incorporated into the general membership meeting.

Organization Information

| | |
|---------------------------|--|
| Organization Name: | |
| Contact Person: | |
| Contact Phone #: | |
| Contact Email: | |

PROPOSED RULE CHANGES

| Baseball Teams | Current Rule | Proposed Change |
|-----------------------|---------------------|------------------------|
| <i>10U Level</i> | | |
| <i>12U Level</i> | | |
| <i>15U Level</i> | | |
| | | |
| Softball Teams | Current Rule | Proposed Change |
| <i>10U Level</i> | | |
| <i>12U Level</i> | | |
| <i>16U Level</i> | | |

All requests must be submitted by February 1st. In order for your request to be reviewed, all information must be completed in its entirety. We will contact you after receipt and review of your completed request form. Please submit your request to the following: GLOWAcademyNY@gmail.com

OFFICE USE ONLY

| | | | |
|---------------------------------------|--------------------------------------|--------------------------------------|---------------------|
| <input type="checkbox"/> Confirmation | <input type="checkbox"/> Google Docs | <input type="checkbox"/> White Board | Date Received _____ |
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