



League Office  
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## Ranking Referral Form

This form is for placement of people based on known ability if they don't fit the league or tournament criteria. If you have someone that you feel warrants being ranked differently than their current rank, **please** fill out the following information for the player to be reviewed. If warranted, the player will then be reviewed by the pool committee. **All submissions will be left strictly confidential.**

This form must be filled out completely and submitted to the league office.

Player Suggested Ranking (please circle):    B      BB      A      AA      AA/M

Player Name:	League Plays In:	Year:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Tournament Name And Place Finished:	_____	Place: _____
Tournament Name And Place Finished:	_____	Place: _____
Tournament Name And Place Finished:	_____	Place: _____
Tournament Name And Place Finished:	_____	Place: _____

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Submitted by: \_\_\_\_\_ Phone # \_\_\_\_\_ Date: \_\_\_\_\_

League you play in: \_\_\_\_\_

\*If you prefer not to leave your name you must attach documentation/website providing information that would warrant a review of the player by the pool committee