

Player Waiver Request Form



Name of Club Requesting Waiver _____

Name of Team & Gender/Age Division _____

Name of Club Being Waived From _____

Name of Player to be Waived _____

Player's Physical Address _____
(street & town)

Player's School _____

Grounds for Waiver

- School Choice** – Player in question attends a school in the town our club represents.
Name of School _____
- Stranding** – There is no team in the town of the player's residence for their age group.
- Cut** – The player was cut from the club representing their town and does not have another travel team option within their town.

Verification

Club Coordinator For Club Requesting The Waiver

Our club has executed due diligence in an effort to confirm that the indicated grounds for a waiver are accurate as applied to the above named player.

Signature _____

Date _____

Club Coordinator For Club Player Is Waived From

Our club acknowledges the conditions of this waiver.

Signature _____

Date _____

Signed waivers must be submitted prior to roster verification by the registrar.