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## REQUEST TO PLAY OUTSIDE OF ELIGIBLE AGE

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Club: \_\_\_\_\_

Players Name: \_\_\_\_\_

Players Date of Birth: \_\_\_\_\_ Players Current Age Division: \_\_\_\_\_

Team to be granted permission to play with: \_\_\_\_\_

Reason for Request:

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*I acknowledge that playing at a different age level may subject my child to play against older players having a physical advantage.*

Parent / Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CLUB PRESIDENT / SECRETARY / REGISTRAR APPROVAL**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**FQ OFFICE USE ONLY**

Approved  Signed: \_\_\_\_\_ Date: \_\_\_\_\_