



## GOLDEN TRIANGLE YOUTH FOOTBALL & CHEER INDIVIDUAL WAIVER FORM

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

SUBMITTED BY (*Name, Board Position*): \_\_\_\_\_

PARTICIPANT NAME: \_\_\_\_\_

PARTICIPANT DIVISION: \_\_\_\_\_

WAIVER DETAILS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DID THE WAIVER PASS YOUR ASSOCIATION'S VOTE? ☐ Yes ☐ No

PLEASE SUBMIT TO: [gtyfc.board@gmail.com](mailto:gtyfc.board@gmail.com)

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### **TO BE COMPLETED BY GTYFC BOARD:**

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

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

GTYFC BOARD APPROVAL: ☐ Yes ☐ No

DETAILS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE ASSOCIATION NOTIFIED OF DECISION: \_\_\_\_\_

*If approved, this document will be forwarded to the GTYFC Registration & Certification Coordinator.*