

**Tualatin Valley Youth Football
Waiver for Team Placement 2008**

**THIS FORM MUST BE COMPLETED WITH ALL REQUIRED SIGNATURES AND BE
SUBMITTED TO A DIVISION PRESIDENT BY AUGUST 16, 2008 TO BE VALID**

Date _____ Player's Name _____

Home Association _____ Birthdate _____

Grade _____ Age _____ Years of Prior Football Experience _____

Reason for Upgrade or Transfer Request:

**We hereby agree to the proposed change
For the above named player:**

Head Coach Signature (proposed team) _____

Parent/Guardian Signature _____

Home Association President _____

*New Association President _____

(* Only if moving outside boundaries)

Date presented to Division President _____

- Approved**
- Denied**

TVYFL Division President Signature _____