



Acknowledgement of RECEIPT for WARRIORS PARENT & PLAYER POLICIES & GUIDELINES

Parent/ Legal Guardian:

I am the parent or legal guardian for the athlete named below and I have read and understand the Warriors Parent/Player Policies & Guidelines. I agree to review policy with the athlete named below. I acknowledge and agree to all policies set forth in the Warriors Policies & Guidelines. Failure to comply will result in aforementioned sanctions.

Legal Guardian Signature: _____ Date: _____

Print Name: _____

Relationship: _____

Athlete:

I have read and understand the above Warriors Parent/Player Policies & Guidelines and have reviewed them with my parent/guardian. I agree to all policies set forth in the Warriors Policies & Guidelines. Failure to comply will result in aforementioned sanctions.

Athlete: _____ Date: _____