

**Arizona Region of USA Volleyball
Age Waiver Request Form**

Date Received _____

By _____

Please type or print the information below. All lines must be completed to be considered. Submit this Age Waiver Request to the Arizona Region PRIOR to accepting this player as a member of your club for placement on this team. Submittal of an Age Waiver Request DOES NOT guarantee approval. Placement of a player with an Age Waiver on a team roster may only be done after approval by the AZ Region Registrar. All info below is REQUIRED info from the club. Any missing info will delay the processing of this request.

Player Name: _____ Current Season _____

1. Current Club Name: _____
2. Name of the team on which you would like this player to play: _____
3. In what division is this team registering? Age Group? _____ Competition Division? _____
4. Have you requested any age waivers for this team already? Max of 2 is allowed. _____
5. Is this team your highest ranked team in this age group for your Club? _____
6. Does your Club have lower ranked teams in the correct age division? _____
7. Is this team going to travel to qualifiers or interregional tournaments? _____
8. Name of the Coach for this team? _____
9. What is this player's date of birth? _____ What Grade in School? _____
10. What is the cutoff date for the age category desired? On or after September 1, _____
11. Did this player play club last year? If yes, for what club? _____
12. Explain, in detail, why this player should be granted a waiver: _____

I certify that the above information is correct and true. I understand this form must be **submitted and approved BEFORE** the player requesting an age waiver is guaranteed placement on the underage team. **I understand that this player will not be allowed to participate in any national qualifying or championship tournaments with this team in this age category. In the Arizona Region, a maximum of two players with an age waiver may be allowed per team in the Club Division only and must first be approved by the Arizona Region Registrar.** I hereby formally request that this player be allowed to participate on this younger age team in Arizona Region tournaments. I understand if the request is denied the team may be required to register and play in an older age competition division to accommodate this player.

Club Director _____

Date _____

Rev 8/5/19

For Region Use Only	<input type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	Date Reviewed _____	By _____
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