

## Regina Minor Football 2000 Inc.

## **Release Form**

To maintain proper player accountability, as well as tracking equipment returns, the following release form must be signed by the Head Coach and the Parent/Guardian of any player that has decided not to play.

Player Name:	Team:			
Coach's Comment:				
Coach's Signature:	Date:			
Parent's Comment:				
Parent's Signature:				·
Requests for Refunds must be submit Note: The registration fee is non-refu	_	office, al	ong with a co	py of this form
The above-mentioned player has retu	urned the following equipm	nent.		
Helmet ID #	Returned	Yes	No	
Shoulder Pads ID #	Returned	Yes	No	
Jersey #	Returned	Yes	No	
Game Pants	Returned	Yes	No	
Date Player Quit:				
Number and dates of Games player p	articipated in:			
Coach's Signature:	Date:			