

# BUX-MONT POP WARNER YOUTH FOOTBALL LEAGUE

## REGISTRATION WAIVER

### PARTICIPANT INFORMATION

NAME : \_\_\_\_\_  
ADDRESS : \_\_\_\_\_  
CITY : \_\_\_\_\_  
STATE : \_\_\_\_\_  
ZIP : \_\_\_\_\_  
  
TELEPHONE : \_\_\_\_\_  
DATE OF BIRTH : \_\_\_\_\_  
SCHOOL DIST : \_\_\_\_\_

THE ABOVE PARTICIPANT HAS BEEN GRANTED THIS  
WAIVER TO REGISTER WITH THE FOLLOWING ASSOCIATION :

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NAME OF ASSOCIATION WHERE YOUTH WILL PARTICIPATE

THIS WAIVER WILL BE VALID FOR AS LONG AS THE PARTICIPATION  
TO THE ABOVE ASSOCIATION IS CONTINUOUS, MEANING ROSTERED  
WITH THAT ASSOCIATION. ANY BREAK IN THAT PARTICIPATION VOIDS  
THIS WAIVER .

ANY SIBLINGS WILL ALSO BE GRANTED A WAIVER. A WAIVER FORM  
WILL NEED TO BE COMPLETED FOR ANY SIBLING. THE GRANTING  
ASSOCIATION WILL HAVE AN OBLIGATION TO SIGN THE FORM.

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NAME OF GRANTING ASSOCIATION

THIS WAIVER FORM MUST BE SIGNED BY AN AUTHORIZED MEMBER  
OF THE GRANTING ASSOCIATION.  
FORM MUST BE PLACED IN THE TEAM BOOK.

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SIGNATURE OF AUTHORIZED MEMBER ( GRANTING ASSOCIATION )

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DATE SIGNED