



**PACIFIC COAST FOOTBALL/CHEERLEADING
CONFERENCE, INC.
WAIVER/RELEASE REQUEST FORM**

Revised 1/10

3701 Inglewood Ave PMB #318
Redondo Beach, Ca. 90278
Fax: (310) 626-8542
Email: Teampcc@gmail.com

INSTRUCTIONS:

1. A Waiver/Release will be granted only if you have a valid reason or your request will be automatically denied. See reasons below!
2. This form **MUST** be completely filled out and submitted by the parent **ONLY** and mailed, emailed, or faxed to the above information provided before **July 31, 2010**.
3. You may **NOT** sign-up/register your child with the city/association you are requesting, until you receive an approval letter from the Conference Waiver Committee, or **YOUR APPLICATION WILL BE DENIED**.
4. An interview meeting must be scheduled with the Conference Waiver Committee.
5. The approval letter **MUST** be presented to the association at the time of sign-ups/registrations, and a copy must be submitted with the child's paperwork at the time of paperwork certification.

PLEASE PRINT CLEARLY

SECTION I: Participants Information:

Player/Cheerleader Name: _____ Birth date: ____/____/____ Age: _____
 Current Address: _____ City: _____ Zip Code: _____
 Did you participate in the PCC last year? () Yes or () No If so, what city/Association? _____
 What City/Association are you requesting release from? _____
 What City/Association are you requesting to participate in? _____

SECTION II: Parents Information:

Fathers Name: _____ Mothers Name: _____
 Home Phone #: (____) _____ - _____ Mom Cell #: (____) _____ - _____ Dads Cell #: (____) _____ - _____
 E-Mail address: _____ or _____
 Do both parents live at the address listed above? () Yes () No
 If NO list the parents name, different address & phone numbers below.
 Parents Name: _____
 Address: _____ City: _____ Zip Code: _____
 Home Phone #: (____) _____ - _____ Cell #: (____) _____ - _____

SECTION III: Request Information:

In order for a waiver/release to be granted, you must have a **valid** reason. If your request is one of the following reasons, please note that **VALID DOCUMENTATION MUST ACCOMPANY THIS FORM** in order for your request to be granted. **Failure** to provide any of the requested documents will null and void your waiver/release request, and result in an automatic DENIAL.

- PAID Childcare located in the city/association boundaries where we wish to participate.
 - Must submit legitimate proof of childcare along with receipts and address of facility, as well as most recent school report card.
- Attends school on a valid school permit in the boundaries of the city/association where we wish to participate.
 - Must Submit a Copy of your current and valid School permit along with most recent school report card.

SECTION IV: Parents Verification: I certify by my signature below that the information that I have provided to the Pacific Coast Conference is true and correct and if found to be supplying the Conference with false information or documentation, my child may be removed from the team/squad he/she is playing with and that the team/squad will forfeit all of the games played for the current season.

Signature of either Parent

Please PRINT Name

Date