



Terrell Soccer Association

Age Division Waiver

I, the parent/guardian of the registrant, a minor, agree that the registrant and I are requesting that he/she move up to the next available division.

He/she would have originally played in _____ division but would like for he/she to be placed in a _____ division.

I, the parent/guardian of the registrant understand that my child could be allowed to play up a division but if I decide for any reason that moving him/her up in age division was not the correct choice then he/she will NOT be allowed to move back down a division per North Texas Rules and Regulations and Terrell Soccer Association by laws.

I am also aware that by moving my child up in age division, I am accepting that the choice I make could impact my child in a good way or bad way due to playing with an older age group, and will not hold Terrell Soccer Association liable for any consequences by moving him/her up in age division.

Name: _____
Parent/Legal Guardian (please print)

Date: _____

Signature: X _____