



GRADE/AGE VARIANCE CONSENT FORM

I (print name) _____ PARENT OR LEGAL
GUARDIAN OF _____ DO ACKNOWLEDGE
AND UNDERSTAND THE RISK AND EXPECTATIONS OF JYFA RULE 1.3 ALLOWING MY CHILD
TO PLAY TACKLE FOOTBALL IN ACCORDANCE WITH HIS OR HER AGE GROUP AND NOT
WITH THE CURRENT GRADE OF MY CHILD IN _____ (JYFA ASSOCIATION) GRADE
FOR UPCOMING SCHOOL YEAR _____ AGE AS OF OCT 1ST OF THIS YEAR _____
CONSENT TO PLAY IN GRADE _____

PARENT OR GUARDIAN SIGNATURE _____

DATE _____