



Date: _____

2018-19 REQUEST FOR AGE GROUP EXCEPTION

Player's Name: _____

Parent's name: _____

Address: _____

Date of Birth: _____

Years played for HC Lax _____

Previous coach's name _____

REQUEST TO PLAY UP: _____ or PLAY DOWN: _____

Birthdate age group: _____

Requested age group: _____

Height: _____ Weight: _____

2018-2019 SCHOOL GRADE: _____

Brief explanation for this exception: (include which years all-stars, etc)

Email this completed form to Exceptions@HCLacrosse.org

Once approved, it will be submitted to Ho. Co. Rec. & Parks for database adjustment