YSLETA INDEPENDENT SCHOOL DISTRICT ATHLETICS

WAIVER OF PLAYER PARTICIPATION RULE FOR VOLLEYBALL OR BASKETBALL

A coach and principal may complete this form and submit to the Athletic Office if a **volleyball team** competes with fewer than 12 players or if a **basketball team** competes with fewer than 10 players in a regular season game.

form

| Used when athlete(s) will miss a game due to involvement in other school activities or family emergency. | This |
|--|------|
| is to be faxed (435-9555) to the Athletic Office by 4:00 PM on the day preceding the game. | |
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| | |

Pre-Contest Waiver:

| | Date of Req | luest: | | School: | | | |
|-----------|------------------------|---|---------|--|-------|--|--|
| sno | Request for | Game(s) On: | | | | | |
| Campus | 1 | Miss Contest: | | | | | |
| Ü | THE TIME DAME CONTROLL | | | | | | |
| | Name of Playe | ar | | Number of Player | Grade | | |
| | Reason | | | | | | |
| | Number of players w | per of players who will compete in game(s): | | | | | |
| | Coach's Signa | ture | Date | Campus Administrator's Signature | Date | | |
| IS IS | Athletic Office by 4: | game day illness 00 PM on the firs | | | | | |
| Campus | Who Missed Contest: | | | | | | |
| | Name of Playe | ar | | Number of Player | Grade | | |
| | Reason | | | | | | |
| | Coach's Signa | ture | Date | Campus Administrator's Signature | Date | | |
| | | | | | | | |
| | _ | | | | | | |
| Athletics | ☐ Approved | □ Not A | pproved | Athletic Director/Designee's Signature | Date | | |

This form will be faxed back to the campus after Athletics Director's Signature.

Ysleta Independent School District does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs, activities or employment. El Distrito Escolar de Ysleta no discrimina en base a raza, color, nacionalidad, sexo, discapacidad, y/o edad, en sus programas, actividades o empleo.