



Age Requirement Exception Request

Today's Date: _____

Participant's Name: _____

Participant's Age & Grade: _____

Participant's Phone Number: _____

Participant's Email Address: _____

Name of Program: _____

Program's Listed Age/Grade Requirement: _____

Reason For Requesting Age Exception:

Parent/Guardian Signature: _____

All applications for Age Requirement Exceptions will be given to Program Coordinator, Dave Grubb and discussed amongst the administration/programming staff. Once a decision has been made regarding your application, or additional questions remain, you will be contacted by a member of the Recreation Department staff. Thank you!

Approved by: _____ **Date:** _____

Denied by: _____ **Date:** _____