

2017 DRGSL Player Waiver Form

Association: _____

Player Name: _____ Birthdate: _____

Waiver requested from: _____ To: _____

Reason for Waiver Request:

Player Name: _____ Birthdate: _____

Waiver requested from: _____ To: _____

Reason for Waiver Request:

Player Name: _____ Birthdate: _____

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