



Cen-Cal Junior Football Waiver for Team Transfer

Team Requesting Waiver: _____ Date: _____

Team of Origin: _____ Yrs: _____

Player Name: _____ Age: _____

Reason for Transfer: _____

Player Signature: _____

League Rep for Requesting Team: _____

Team of Origin Representative: _____

Approval: Yes _____ No _____

Cen-Cal Commissioner Signature _____