EXEMPTION FORM

Submitted by: _____ Age Group: _____

Club Name: _____ Team Name: _____

Phone: (___) ____ - _____ Email: _____

Date of Submission: M / D / Y

Below, please provide your rationale as to why you require an exemption. Other documentation should also be permitted if needed.

_____

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** For office use only **

Approval: Yes No

Alberta Basketball Signature: _____