



**ALA Criteria for Overage Exemption and Permission to participate in Tournament and Provincial Competition by ALA Executive prior to May 1 for Minor Box and July 15 for Field Lacrosse.**

**Over Age Exemption Form:**

<b>Name:</b>	
<b>Club:</b>	
<b>Division as per ALA Regulations:</b>	
<b>Division requesting to participate in:</b>	
<b>Date of Birth:</b>	
<b>Height:</b>	
<b>Weight:</b>	
<b>Medical Condition Declared:</b>	
<b>Years Played:</b>	
<b>Other Relative Information:</b>	

**The flowing criteria may be considered for overage approvals. The decisions of the ALA Executive may consider the following criteria but not limited to the information provided.**

- 1. Date of Birth**
- 2. Physical Stature**
- 3. Medical Condition as signed off by Medical Doctor**
- 4. Years Played**
- 5. Number of Players on the team/division that the overage request is being made for**

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**Approval, Club** **Date**

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**Approval, Local Governing Body** **Date**

reasonable medical accommodation     player safety     preservation of a program.

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**Approval, ALA Executive Director** **Date**

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**Denial, ALA Executive Director** **Date**