

Fast Tracking Player Request Form: Winsloe Charlottetown Royals FC

Please complete and submit this form to the Club Head Coach.

Age Group Player Info		mation (First and Last Name)	DOB	DOB	
Reason for Request		Age Group Applied For			
Parent Information (First and Last Name)				Date	
		Club Head Coach to Fill in Below			
Approved or N Approved	ot				
If NOT Approve	ed, Explain V	Vhy			
Club Head Coa	ach			Date	
		Acknowledgment:			

I have read and understand the "Fast Tracking Player Policy".

Consent:

I consent to the Club Head Coach assessing my request.