



# CALGARY WOMEN'S SOCCER ASSOCIATION

GENERATIONS UNITING TOGETHER

## PROVINCIAL OPT-OUT DECLARATION

Date: \_\_\_\_\_

YYYY-MM-DD

Team Name: \_\_\_\_\_

TEAM NAME

Division: \_\_\_\_\_

CURRENT CWSA DIVISION

Season: \_\_\_\_\_

INDOOR / OUTDOOR

YEAR

## AUTHORIZING SIGNATURE

On behalf of the CWSA registered team named above, we wish to withdraw our eligibility for post-season Provincial competition for the above-named season.

Team Official: \_\_\_\_\_

FULL NAME (please print)

Signature: \_\_\_\_\_

A Provincial opt-out declaration form must be submitted by the applicable season's deadline for any team who does not wish to participate in post-season Provincial competition, regardless of their rank in division standings.

Teams who do not opt-out prior to the deadline or otherwise withdraw their team's eligibility from post-season competition for any reason will be subject to a fine as stipulated in the CWSA Provincial Declaration Policy.

## FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_

Form can be submitted by email to [office@mycwsa.ca](mailto:office@mycwsa.ca)