COACH, PLAYER & PARENT ATHLETIC PLEDGE AGREEMENT

Team Name:	Grade/Age Sport		
:	Print Name	Signature	Date
Coach:			
Coach:			
	Player Signature O	Parents Signatures	Date
1. Player/Paren	tts:		/
2. Player/Paren	ts:		/
3. Player/Paren	tts:	1-	/
4. Player/Paren	its:		/
5. Player/Paren	its:	0 7000	/
6. Player/Paren	ts:	/	/
7. Player/Paren	its:	/	/
8. Player/Paren	its:		/
9. Player/Paren	ts:	/	/
10. Player/Pare	nts:	/	/
11. Player/Pare	nts:	/	/
12. Player/Pare	nts:	/	/

^{**}BY SIGNING THIS AGREEMENT, I HAVE READ AND UNDERSTAND MY RESPONSIBILITIES FOR YOUTH ATHLETICS.