



# AGE REQUIREMENT EXCEPTION

Today's Date: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Age & Grade: \_\_\_\_\_

Parent/Guardian's Name (If applicable): \_\_\_\_\_

Participant/Parent's Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Program: \_\_\_\_\_ Activity #: \_\_\_\_\_

Program's Listed Age/Grade Requirement: \_\_\_\_\_

Reason For Requesting Age Exception:

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**\*OFFICE USE ONLY\***

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Decision Made By: \_\_\_\_\_ Date: \_\_\_\_\_

*Once a decision has been made, or additional questions remain, you will be contacted by a member of the Recreation Programming Staff. Thank you!*