CALGARY VILLAINS FC PLAYER APPEAL FORM



Please complete the following steps for the club to review your Player Placement Appeal Form.

1. Player Information

Player Name:	Birthdate:
Program Registered:	Gender:
Email:	Phone :

- 2. Indicate the reason why you are requesting an appeal?
- a) Player played a higher level consistently in youth soccer. (Yes or No)
- b) Travel / Carpool We will not move players up for this request but can move players down. (Yes or No)
- c) Injury For Whole Season (Must have doctors note included)
- d) Other Reason (Yes or No)

If Other Reason, please let us know why?

3. Please email the completed form to our program lead <u>cvfcprogressionleads@gmail.com</u>

Please note:

- Phone calls will not be accepted for player placement appeals.
- All appeals will be reviewed by program lead and club staff before making a decision.
- Families will be notified by email.

Player Appeal Decision (Approved or Declined)

Club Section Only

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