



Home of the Panthers
www.NMSC.net

2017-18 Indoor Play Together Request Form



Home of the Panthers
www.NMSC.net

All parents of players registering at the NMSC, have the opportunity to submit a request for their child to play with **ONE** other player in the same age group. All requests must be made at the time of registration and are subject to the following conditions:

- 1) The request **must be reciprocated**. This means both players must complete this Play Together Request Form. Unreciprocated requests will not be accepted.
- 2) Requests must be dropped off at the office during office hours (or through the mail slot) on or **before October 1st** and both registrations must be paid in full. Emailed or faxed-in requests will not be accepted.
- 3) Registration at the NMSC is **not dependant** on the 'Play Together Request' being granted.
- 4) Play Together Requests not being granted do **NOT** constitute a request for a refund. **No refunds will be given!**
- 5) All teams are finalized and players will not be moved unless there has been an office error.
- 6) Play Together Requests are **NOT GUARANTEED.**

ALL REQUEST FORMS MUST BE IN THE OFFICE ON OR BEFORE:

**** OCTOBER 1, 2017 ****

<u>PLAYER 1</u>	<u>PLAYER 2</u>
Name: _____	Name: _____
Year of Birth: _____	Year of Birth: _____
Age Div.: _____ Gender: _____ Day of Play: _____	Age Div.: _____ Gender: _____ Day of Play: _____
As the parent (guardian) of PLAYER 1 I would like to request that PLAYER 1 be placed on the same team as PLAYER 2 . I agree to the conditions noted above and understand that this request is not guaranteed . I confirm that the registration for PLAYER 1 is not dependant on this request being granted.	As the parent (guardian) of PLAYER 2 I would like to request that PLAYER 2 be placed on the same team as PLAYER 1 . I agree to the conditions noted above and understand that this request is not guaranteed . I confirm that the registration for PLAYER 2 is not dependant on this request being granted.
_____ Parent (Guardian) Name	_____ Parent (Guardian) Name
_____ Parent (Guardian) Signature	_____ Parent (Guardian) Signature
_____ Date	_____ Date

NMSC Office Use:

Received: _____ Date: _____ Reviewed By: _____ Date: _____

Granted: YES: _____ No: _____