CIF/CENTRAL COAST SECTION
6830 Via Del Oro, Suite 103,
San Jose CA 95119
408-224-2994 / 408-224-0476 (FAX)
info@cifccs.org (e-mail) www.cifccs.org

FOURTEEN YEAR OLD VARSITY PARTICIPATION FORM

(To be completed for any 14 year old student playing varsity football)

This form is to verify that we have documentation **on file at the school** stating approval by a doctor, the parents and coach of each 14 year old student participating in varsity football listed below:

Student's Name	**Grade**	**Date of Birth**

Name of School: _____

School Year: _____

Principal's Signature: _____

8/2/2007