



City of Florence Athletic & Sports Tourism Department
513 Barnes Street
Florence, SC 29501

Special Request Form [Please Print]

Sport for which Request is being made:

Age group:

Parent/Guardian Name:

Youth Name (s):

Address (if different for what we have on file currently):

Contact Info for Parent/Guardian:

Email Address:

Phone Number (s):

Date of Request:

Reason for Request (please print explanation):

Parent/Guardian Signature:

Date:

League President Signature:

Date:

Athletic Director Signature:

Date: