

# BCYC Player Protect Form



Date: \_\_\_\_\_

This form is to notify BCYC Admin that \_\_\_\_\_ (Head Coach's name) in the \_\_\_\_\_ division will protect the following player(s) in the draft:

Player 1 (i.e. Head coach's child if applicable): \_\_\_\_\_  
(Name of child)

Player 2 (i.e. Assistant coach's child if applicable): \_\_\_\_\_  
(Name of child)

By signing this form, the above-mentioned players agree to play for the above-mentioned coach for the 2024-2025 Basketball season. In addition, no other team(s) may recruit the above-mentioned player once this form has been signed and received by BCYC. In the event the player wishes to reverse his/her decision, the player's parents/guardian must submit in writing to the BCYC Assistant Director (justin@beltonyouth.com) their reason(s) for not wanting their child (ren) to be protected by the above coach. The assistant director will decide at that time. All admin decisions are final.

Head Coach Print Name: \_\_\_\_\_

Head Coach Signature: \_\_\_\_\_

Player 1 Parent/Guardian Print Name: \_\_\_\_\_

Player 1 Parent/Guardian Signature: \_\_\_\_\_

Player 2 Parent/Guardian Print Name: \_\_\_\_\_

Player 2 Parent/Guardian Signature: \_\_\_\_\_

Thanks,  
BCYC Admin

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\*\*\*FOR OFFICE USE ONLY\*\*\*

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ APPROVED \_\_\_\_\_ Denied | Assigned Team: \_\_\_\_\_