

Vancouver Mainland Football League
HELMET VISOR REQUEST FORM



Date of Request: ____ / ____ / 2009
MM / DD / YYYY

All requests for the use of a Helmet Eye Shield ("Visor") must be made to The League Commissioner of the Vancouver Mainland Football League for due consideration and approval. Any use of a Visor without prior approval will result in disciplinary action by the Vancouver Mainland Football League against the offending parties.

VMFL Eye Shield Rules:

Section 6 - Uniforms and Equipment

F) Clear visors are allowed with out any documentation. All tinted visors must be authorized by the VMFL Commissioner and must be submitted on the VMFL Visor Authorization Form.

An Optometrist or Ophthalmologists must complete this Form. No variations of the form will be allowed.

This form is to be filled out and signed by both the player and the Optometrist or Ophthalmologist. Completed forms are to be sent to the League Commissioner by your Association President for approval.

Players Name: _____

Team Affiliation: _____

Players Address: _____

Players Contact Numbers: _____

Players Signature: _____

This section to be completed by an Optometrist or Ophthalmologist

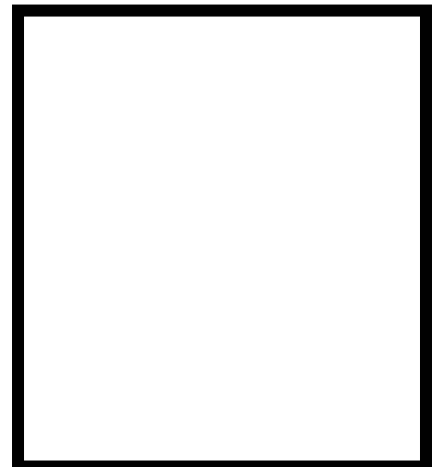
Medical Reason for Eye Shield: _____

Physicians Name: _____

Physicians Contact Number: _____

Physicians Signature: _____

Physicians Comments: _____



Optometrist or Ophthalmologist Stamp