



DEPARTMENT OF PARKS & RECREATION

Located in the Citizen Center

8076 Kings Highway

P.O. Box 71

King George, Va. 22485

Telephone: (540) 775-4386

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YOUTH SPORTS AGE WAIVER FORM

I, the parent request that my son/daughter be considered one year older than his/her true age for consideration in youth sports league placement. I realize the inherent and potential danger such a decision with respect to the nature of the sport specified on this document.

In consideration of accepting my waiver request, I hereby give my consent and approval for my son/daughter to participate in the activity sponsored by the King George County Department of Parks and Recreation. I will not hold the Department, Instructors, Schools, Officials, Coaches or Employees of each responsible in case of accident or injury as a result of his/her participation in this program. I understand the risks involved with this activity and know that my child is physically able to participate in this program.

SPORT: _____ **AGE DIVISION:** _____

CHILD'S NAME: _____ **DOB:** _____

PARENT'S NAME: _____ **PHONE:** _____

PARENT'S SIGNATURE: _____ **DATE:** _____