



DEPARTMENT OF PARKS & RECREATION
Located in the Citizen Center
8076 Kings Highway
P.O. Box 71
King George, Va. 22485

Telephone: (540) 775-4386
FAX: (540) 775-5255

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:_____