



JOINT BASE LANGLEY-EUSTIS YOUTH SPORTS REGISTRATION

Activity: Baseball Basketball Cheerleading Flag Football Soccer Other: _____
 (Select one)

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 U.S.C. 801 2 and 44 U.S.C. 3101.
PRINCIPLE PURPOSES: To register dependent youth of military, retired and DoD personnel in the Air Force Youth Programs. Providing Youth Programs the authorization to record youth/family information.
ROUTINE USES: This form may be disclosed to any DoD component or part thereof, and upon request to other Federal, State and local government agencies in the pursuit of their official duties; disclosed to new media, used for other lawful purposes including law enforcement and litigation.
DISCLOSURE IS VOLUNTARY: Failure to provide the information may preclude the individual from participating in Air Force sponsored youth programs.

PARTICIPANT'S INFORMATION

Name: _____ Nickname: _____
 (Last) (First) (MI)
 Birth Date: _____ Grade in School: _____ Gender: Male Female
 (MM / DD / YY) (Select one)
 Height: _____ ft _____ in(s) Weight: _____ lbs Shirt Size: YS YM YL AS AM AL AXL
 (Select one)
 Playing Age: _____ Playing Experience: _____ yr(s) Skill Level: Beginner Intermediate Advanced
 (Select one)

SPONSOR'S INFORMATION

Name: _____ Rank/Rate: _____ Unit: _____
 (Last) (First) (MI)
 Status: Active Duty Civilian, APF Civilian, NAF Contractor National Guard
 (Select all that apply) Reserve Retired Wounded Warrior Other: _____
 Branch of Service: USAF USA USCG USMC USN Other: _____
 (Select one)

CONTACT'S INFORMATION

Name: _____ Relationship: _____
 (Last) (First) (MI)
 Cell No.: _____ Home No.: _____ Work No.: _____
 Personal Email: _____ Work Email: _____

VOLUNTEER OPPORTUNITIES

(Select all that apply. *Please ask staff for application.)

Coach* Team Parent Field Maintenance Administration
 Assistant Coach* Concessions Official/Referee Other: _____

REFUND POLICY

Full refunds will be processed for payments received for Youth Sports activities if participation is low and the program must be cancelled. Partial refunds maybe granted for medical reasons (doctor's note required), PCS Move (orders required), or for other reasons not stated here on a case by case basis. Funds may not be credited or transferred to another sport. Upon completion of the sports season refunds are no longer authorized. All refunds must be approved by the Youth Sports & Fitness Supervisor.

SIGNATURE OF PARENT/LEGAL GUARDIAN: _____ **DATE:** _____

FOR OFFICIAL USE ONLY

Staff Initials: _____ Registration Date: _____ Price: _____ Exam Date: _____
 (MM / DD / YY) (MM / DD / YY)



JOINT BASE LANGLEY-EUSTIS YOUTH SPORTS CODE OF ETHICS

PLAYERS' CODE OF ETHICS

I hereby pledge to be positive about my youth sports experiences and accept responsibility for my participation by following this Players' Code of Ethics pledge:

- I will encourage good sportsmanship from fellow players, coaches, officials and parents at every game and practice by demonstrating good sportsmanship.
- I will attend every practice and game that I can, and will notify my coach if I cannot.
- I will expect to receive a fair and equal amount of playing time.
- I will do my very best to listen and learn from my coaches.
- I will treat my coaches, other players, officials and fans with respect regardless of race, sex, creed, or abilities and I will expect to be treated accordingly.
- I deserve to have fun during my sports experience and will alert parents or coaches if it stops being fun.
- I deserve to play in an environment that is free of drugs, tobacco and alcohol and expect adults to refrain from their use at all youth sports events.
- I will encourage my parents to be involved with my team in some capacity because it is important to me.
- I will do my very best in school.
- I will remember that sports participation is an opportunity to learn and have fun.

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PLAYER ACKNOWLEDGEMENT

SIGNATURE OF PLAYER:

PRINTED NAME:

DATE:

PARENTS' CODE OF ETHICS

I hereby pledge to provide positive support, care, and encouragement for my child participating in youth sports by following this Parents' Code of Ethics:

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice or other youth sports event.
- I will place the emotional and physical well being of my child ahead of my personal desire to win.
- I will insist that my child play in a safe and healthy environment.
- I will require that my child's coach be trained in the responsibilities of being a youth sports coach and that the coach upholds the Coaches' Code of Ethics.
- I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I will demand a sports environment for my child that is free from drugs, tobacco and alcohol and will refrain from their use at all youth sports events.
- I will remember that the game is for youth - not adults.
- I will do my very best to make youth sports fun for my child.
- I will ask my child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed or ability.
- I will help my child enjoy the youth sports experience by doing whatever I can, such as being a respectful fan, assisting with coaching, or providing transportation.
- I will read the National Standards for Youth Sports and do what I can to help all youth sports organizations implement and enforce them.

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PARENT ACKNOWLEDGEMENT

SIGNATURE OF PARENT/LEAGAL GUARDIAN:

PRINTED NAME:

DATE: