



NAF Atsugi Youth Sports Registration Form

PARENT INFORMATION

Sponsor Name: _____ Work Phone: _____

Spouse Name: _____ Work Phone: _____

E-mail Address: _____
(to receive Youth Sports email updates)

Will you volunteer to coach if needed: YES NO ASSIST

Does your child have any special needs we should be aware of? YES NO

Uniform (Please circle the correct size) _____

Shirt: YXS / YS / YM / YL / AS / AM / AL / AXL

Pants: YXS / YS / YM / YL / AS / AM / AL / AXL

Player Name: _____ Date of Birth (MM/DD/YY) _____

Sex: _____ Age: _____ Home Phone: _____

Mailing Address: _____

Release for Medical Treatment (Minor)

As the parent or legal guardian of the above named player, I hereby give my consent for emergency medical care prescribed by a duty Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve life, limb, or the well being of my dependent.

Release from Liability

I/We the parent/guardian of the above named participant, a minor, hereby give my/our approval for the said registrant to participate in any and all Youth Sports camps, including transportation to and from all activities.

I/We the parent/guardian of the registrant, a minor, agree that I/we and the participants will abide by the rules of the NAF Atsugi Youth Sports program. Knowing that participation in Youth Sports may result in serious injuries and that the protective equipment does not prevent all injuries to players, I/we hereby waiver, release, absolve, indemnify, and agree to hold harmless the program and its affiliated organizations, participants arising out of any injury whether the result of negligence or for any transportation I hereby authorize according to Title 10, United States Code, Section 3012.

Refund Policy

Youth Sports refund will be made only in the event of a Permanent Change of Station (PCS) occurring prior to the first regular season game, an injury prior to the first regular season game or cancellation of the program by Youth Sports. If the reason is a PCS or injury, a copy of PCS orders or doctor's orders must be presented. Refund requests must be made in person by the parent with the original receipt. There will be no refunds once the season has started. If a call is placed to the Youth Sports concerning a refund for Youth Sports, the parent/guardian will have one week from when the call was placed to come in person to claim the refund.

Disclaimer

Registration does not guarantee participation. A team may not be available due to lack of registration.

Photo Release

I grant NAF Atsugi MWR the authority to use any photograph of my child while participating in Youth Sports activities for advertisement or local news purposes.

Yes No (Please initial)

Signature: _____ Date: _____

FOR LEAGUE USE ONLY

Amount paid: \$ _____ Check #: _____ Receipt #: _____

Basketball (5-15 yrs) _____ Volleyball (9-15 yrs) _____ Flag Football (7-15 yrs) _____

Soccer (5-15 yrs) _____ Swim Team (5-15 yrs) _____ Roller Hockey (7-15 yrs) _____

Baseball (5-15 yrs)/Softball (9-15 yrs) _____ Cheerleading (5-15 yrs) _____

Smart Start T-Ball (3-4 yrs) _____ Smart Start Soccer (3-4 yrs) _____

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 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 of drugs, tobacco and alcohol, and will refrain from their use at all Youth Sports events.
- 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 what ever I can, such as being a respectful fan, assisting with the coaching or providing transportation.
- 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 read the national Standards of Youth Sports and do what I can to help all Youth Sports organizations implement and enforce them.

Parents' Signature

Date

Players' Code of Ethics

- I hereby pledge to provide a positive attitude and be responsible for my participation in Youth Sports by following the Code of Ethics:
- I will encourage good sportsmanship from my fellow players, coaches, officials, and parents at every game and practice.
- I will attend every practice and game that is reasonably possible and notify my coach if I cannot.
- I will expect to receive a fair and equal amount of playing time.
- I will do my best to listen and learn from my coaches.
- I will treat my coach 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 alcohol, tobacco, and drug free environment and expect adults to respect that wish.
- I will encourage my parents to be involved with my team in some capacity because it is important to me.
- I will do my best in school.
- I will remember that sports is an opportunity to learn and have fun.

Players' Signature

Date

Parents' Signature

Date