



Post Office Box 1403 ♦ King George, Virginia 22485
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Program Information

Registration opens May 1st

Tackle \$225

Cheer \$150

Tackle Football (ages 6-12)

U7

U8

U9

U10

U11

U12

Cheer (ages 6-13)

U6

U8

U10

U13

Participant Information

Player's Full Name: _____ Player's Birth Date: ____/____/____ Gender: Male ☐ Female ☐

Player's Height: _____ Player's Weight: _____ Parent/Guardian's Full Name: _____

Mailing Address: _____ Home #: (____) _____ Work/Cell #: (____) _____

E-mail Address(es): _____

Participation Information

Player's League Age (as of 8/1/2025): _____ How many seasons of overall football/cheer experience (tackle/flag) does the participant possess? _____

Medical Information

NOTE: The KGYAA DOES NOT provide PRIMARY medical coverage or insurance for individual participants. All PRIMARY medical insurance protection MUST be provided by the participant's family, otherwise this application cannot be approved.

Insurance Company: _____ Policy/Group No: _____ Policy Holder: _____

Physician's Name: _____ Please specify known medical conditions (allergies, etc.) the player's coach should know: _____

Emergency contact (if parent unavailable), relationship, phone number: _____

Refund Acknowledgment

I hereby acknowledge and understand that the KGYAA's financial and operational planning is based principally on the commitment of my child to participate during the upcoming **2025** season. Accordingly, I acknowledge and understand that once the KGYAA has obligated funds in the procurement of equipment and supplies, a refund will not be issued if my child quits participating.

Parent/Guardian Signature: _____

Date: _____

Acknowledgment of Risk

I hereby provide my consent and approval for my son/daughter to participate in this activity sponsored by the KGYAA. I will not hold the KGYAA, schools, coaches, officials or employees of each responsible in case of accident or injury as a result of his/her participation in this program. I fully understand the risks involved with this activity and know my child is physically able to participate in this program. In the event of an EMERGENCY, I hereby give my consent for the KGYAA to arrange for my son/daughter, _____ (participant's name), to be taken to the nearest emergency room and be treated by a physician on staff.

Parent/Guardian Signature: _____ **Date:** _____

Media Commitment

I hereby give my permission to the KGYAA to use photographs and videos of my child for publicity (i.e., website images, printed media, etc.) in order to increase community awareness of the KGYAA.

Parent/Guardian Signature: _____ **Date:** _____

Parental Code of Conduct

1. I will not force my children to participate in athletic competition.
2. I will remember that children participate to have fun and learn fundamentals and that the game is for youth -- not adults.
3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
4. I will learn the rules of the game and the policies of the KGYAA.
5. I (and any guest of mine) will be a positive role model for my children and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials, and spectators at every game, practice, or other KGYAA event.
6. I (and any guest of mine) will not engage in any kind of unsportsmanlike conduct with any KGYAA representative, official, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
7. I will not encourage any behavior that would endanger the health and well-being of my child and his/her teammates.
8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
9. I will demand that my child treat other players, coaches, officials, and spectators with respect.
10. I will teach my child that learning fundamentals, doing one's best, and exhibiting outstanding sportsmanship is more important than winning.
11. I will never ridicule or yell at my child (or his/her teammates) for making a mistake and/or losing a game.
12. I will emphasize fundamental skills development and practices to my child and their importance, prioritizing development over winning at all costs.
13. I will emphasize dedication/commitment to the team and will do my utmost to ensure that my child attends every practice and team event.
14. I will contact the Head Coach in advance when my child is unable to attend his/her scheduled practice or team event.
15. I understand that missing practices can/will reduce my child's potential playing time during games.
16. I will promote the emotional/physical well-being of my child (and his/her teammates) ahead of any personal desire I may have for my child to win.
17. I will respect the officials and their authority during games and will never question, discuss, or confront coaches at the game field, and will take time to speak with coaches at an agreed-upon time and place.
18. I will refrain from coaching my child (and his/her teammates) during games and practices, unless I am one of the official coaches of the team.
19. I will ensure that my child wears his/her official KGYAA-issued uniform during games, and that failure to do so may disallow his/her participation.

I understand and acknowledge that I am expected to adhere to this code, and failure to do so may result in disciplinary action (e.g. suspension from KGYAA activities).

Parent/Guardian Signature: _____ **Date:** _____