

2023 YOUTH FOOTBALL PROGRAM

www.spotsylvania.va.us/parksandrec (Online Registration Available)

The registration period for Football is May 8 – June 21, 2023. The Spotsylvania Parks and Recreation Department will offer a Football Program for Spotsylvania County residents ages 8-13. **November 1, 2023 is the age-determination date.** Leagues will be organized as follows:

League Name	Activity #	Ages	Weight Limit
Junior Varsity - League	241600-01	age 8	135 lbs. and under
		age 9	125 lbs. and under
		ages 10	115 lbs. and under
Varsity League -	241601-01	age 9	126 - 140 lbs.
		ages 10	116 - 140 lbs.
		ages 11, 12 and 13	135 lbs. and under



Practices will begin in late July. Games will be played weekday evenings and Saturdays beginning in late August and continuing through November.

PLACEMENT ON TEAMS - Players who participated in the 2022 Youth Football program, who meet age and weight requirements and register on time will return to their 2022 team. If not, players will be placed in the draft. For additional information call (540)507-7534 or (540)507-7535. All children who reside in the same household and are in the same age/weight group will automatically be placed on the same team. (Please make note on the registration form.) A Sports Age Waiver Form for children to participate one age higher than their actual age may be submitted. A child must turn 8 years old by November 1, 2023 to be eligible for a waiver. **Please note that children cannot participate in both Football or Cheerleading and Fall Soccer due to overlapping seasons. Coaches will contact players by July 24, 2023 as to which team they are on and when the first practice will be. Equipment will be handed out the morning of Saturday, July 29, 2023 for players on teams. Games will begin Saturday, August 26, 2023.**

REGISTRATION - **The registration fee is \$55.** Make checks payable to "Treasurer, Spotsylvania County". There will be a \$50.00 service charge on all returned checks. To register your child, complete the registration form and return it along with the fee and a copy of the child's birth certificate (if one is not already on file) to the Parks and Recreation Department by mail or in person. A drop box is located at Loriella Park at the office. The drop box is open 7 days a week from 8:00 a.m. - dusk. **WE CANNOT REGISTER YOUR CHILD UNTIL A BIRTH CERTIFICATE IS SUBMITTED. DO NOT** return forms to the schools. (**A 2.75% Non-Refundable Convenience Fee will be charged on all credit/debit card transactions.) Online registration is available during on time registration only at www.spotsylvania.va.us/parksandrec. A household waiver must be on file at the Parks & Registration Office prior to being able to register online.

DEADLINE TO REGISTER IS BEFORE 4:30 P.M. ON Wednesday, JUNE 21, 2023. Postmarks will not be considered. Late registrations may be accepted if there is space in the league. If teams are balanced prior to the draft, late registrants will be placed on a late registration list. **All participants that register after 4:30 p.m. on the deadline day or any day after the deadline, must pay \$75.** The last day for late registrations is before 4:30 p.m. on Monday, August 21, 2023.

WEIGH-IN - Each player must be officially weighed in at the Parks and Recreation Department. Each child will be weighed **once** during the registration period. A child that does not meet the required weight will be given a second opportunity to be weighed (if they choose to do so) during the registration period. Each child will also be weighed prior to receiving equipment and that will be his or her official playing weight.

If your child cannot be present during normal hours of 8:00 a.m. – 4:30 p.m., Monday – Friday, the department's office at Loriella Park will be open on Saturday, June 10, 2023 from 8:00 a.m. to 11:00 a.m. and Tuesday, June 13, 2023 until 8:00 p.m. and for participants to be weighed.

ALL PLAYERS (INCLUDING THOSE WHO REGISTERED ONLINE, MAILED IN THEIR REGISTRATION OR USED THE DROP BOX) MUST BE WEIGHED BEFORE 4:30 P.M. ON JUNE 21 TO BE ELIGIBLE TO PARTICIPATE.

Participants must be within the league weight requirements or a refund less 20% will be issued. **Players will be weighed wearing shoes.** Players should play in the weight division to which they naturally fall. The use of diets, diuretics, and/or unusual strenuous exercise to cause a child to lose weight to enable him to play in a younger age group is opposed by the Parks and Recreation Department and may seriously endanger a child's health. While physical examinations are not required, they are strongly recommended.

The Spotsylvania Parks and Recreation Department does not provide individual medical insurance for participants in the youth sports programs. Parents are responsible for providing this insurance protection. Information on individual medical insurance provided by Scholastic Insurers can be obtained through the County's public school system.

EQUIPMENT - Each child will be issued a helmet and shoulder pads which must be returned to the Parks and Recreation Department at Loriella Park promptly at the end of the season. Equipment may be collected at the last scheduled game. Players may keep their jerseys. Failure to return equipment will result in the child being ineligible to participate in any other Parks and Recreation activity. No child will be issued a uniform if he has failed to turn in a uniform from a previous sport.

REFUNDS - Those wishing to withdraw from the program before the teams have been formed must do so by contacting the Spotsylvania Parks and Recreation Department. Individuals should follow up their verbal cancellation request with a written

refund request. A 20% administrative fee will be charged on all refunds. **There will be no refunds given to those who withdraw after July 20, 2023.**

The Spotsylvania Parks and Recreation Department is a chapter of the National Youth Sports Coaches Association (NYSCA). We provide training for coaches, which includes \$500,000.00 worth of liability insurance protection. For more information, please call our office.

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SPOTSYLVANIA PARKS AND RECREATION DEPARTMENT
P. O. Box 28, Spotsylvania, VA 22553
2023 FOOTBALL REGISTRATION FORM

www.spotsylvania.va.us/parksandrec (Online Registration Available)

REGISTRATION DEADLINE: Wednesday, JUNE 21, 2023 BEFORE 4:30 P.M.

Please Print Name: First _____ MI _____ Last _____

Street Address _____

Primary Phone #: () _____ Secondary Contact #: () _____ City _____ Zip _____
Alternate #: () _____

Is this a new address or phone number? _____ **Email Address:** _____

How old will your child be on **11-1-23?** _____ Birthdate _____

Birth certificate is (circle one): on file enclosed **must accompany this form if not already on file.**

Please register my child for: (Ages as of November 1, 2023)

JV League 241600-01 (Age 8) **135 lbs. And Under**, (Age 9) **125 lbs. And Under**, (Ages 10) **115 lbs. And Under**

Varsity League 241601-01 (Age 9) **126-140 lbs.**, (Ages 10) **116-140 lbs.**, (Ages 11,12,13) **135 lbs. And Under**

Please check here if you have a waiver form and are requesting for your child to play one age older _____
If checked, a waiver form must be filled out and turned in along with the registration form.

Name of Spotsylvania County School Child Attends: _____ Grade: _____
(If your child attends Private School or is being Home Schooled, list the County school your child would attend)

Weight (Must be filled in by Parks and Recreation Staff) _____ **Date Weighed** _____ **Initials** _____

Medical conditions, injuries, or allergies _____

Optional: Please try to place my child with: Player _____

REQUESTS ARE NOT GUARANTEED Coach _____

Did child participate in the 2022 Football Program with Spotsylvania Parks and Recreation? Yes _____ No _____

If yes, which league and team? JV League Varsity League Team Name: _____

Does child have a brother/sister playing in the same age/weight group? Yes _____ No _____

If yes, name of child _____ Age _____ Weight _____

How many years has the participant played organized football? _____

Parental Consent: (Please read and sign below)

I hereby give my consent and approval for my child named above to participate in the Spotsylvania Parks and Recreation Department's 2023 Youth Football Program, and I, the undersigned, do agree to indemnify and hold harmless Spotsylvania County and the officers, employees, volunteer coaches and agents, thereof, and the Spotsylvania County school authorities from any and all claims or liability, including attorney's fees and costs for any injury or other damage suffered as a result of his/her participation. No child with an outstanding uniform will be placed on a team until the uniform is returned cleaned and mended. I understand that if my child wishes to withdraw from the program before July 20, 2023, I must put my refund request in writing, and I also understand that there will be a 20% administrative fee charged on all refunds. I understand that if my child withdraws from the program after July 20, 2023, my registration fee will not be refunded. I understand that this program is open only to Spotsylvania County residents and hereby certify that my child meets this requirement. I understand that the Spotsylvania Parks and Recreation Department does not provide individual medical insurance for participants in the Youth Football Program and that I am responsible for providing such insurance protection. Information on individual medical insurance provided by Scholastic Insurers can be obtained through the County's public school system. I understand my child may not participate in both Football and Cheerleading or Fall Soccer at the same time.

It shall be the policy of the Department to encourage all children within Spotsylvania County to participate in the programs sponsored by the Department. While the Department shall not assume the position of insurer of health and safety of the participants in the program, the Department does feel it necessary to undertake all reasonable steps to insure that a child is not exposed to unnecessary dangers to said child's life or health.

Signature _____ Date _____

Print Name _____

The registration fee is \$55. Please make checks payable to "Treasurer, Spotsylvania County." There will be a \$50 service charge on all returned checks. **Players must be weighed before 4:30 p.m. on June 21, 2023 to be eligible to participate.** Individuals weighed after this date will be placed on the Late Registration List and will

be required to pay an additional \$20.00.

Head Coaches and Assistants are needed. If you wish to coach or assist, please complete the coaching application.

NYS CA Charter I.D. # 1016

SPOTSYLVANIA PARKS AND RECREATION DEPARTMENT
P. O. BOX 28, SPOTSYLVANIA, VA 22553
507-PLAY (7529)

www.spotsylvania.va.us/parksandrec

FOOTBALL 2023 COACHING APPLICATION

BACKGROUND CHECKS ARE PROCESSED ON ALL COACHING APPLICATIONS
Please fully complete this application, even if you have coached in the past. Please Print.

Full Legal Name _____ Date of Birth _____

Social Security Number _____

Address _____

City _____ Zip _____

Primary Phone #: () _____ Secondary Contact #: () _____ Alternate #: () _____

Email Address _____

Please list the best time to contact you without having to call long distance: _____

Spotsylvania School Your Child Attends: _____ Geographic Area/Subdivision: _____

Personal References: (Please list two local references. Do not list anyone who works for Spotsylvania Parks and Recreation Department.)

1. Name _____ Home Phone _____
Address _____ Work Phone _____

2. Name _____ Home Phone _____
Address _____ Work Phone _____

Experience: (Summarize coaching experience and involvement in children's activities. If you need more space, please use another sheet of paper.)

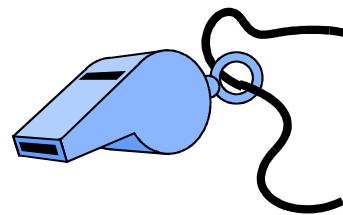
I would prefer to be: (circle one) Head Coach Assistant Coach

I would like to coach: (circle one) Junior Varsity Varsity

Do you have a child participating in football/cheerleading _____

His or her name _____ Child's Age _____ (As of Nov. 1, 2023)

Child's Date of Birth _____ League and Team Name, if known _____



The Spotsylvania Parks and Recreation Department strives to put the best available adults in our youth coaching program. Some of the criteria we look at when making our selections are the following: each coach submits a written application; those who attend training sessions and scheduled meetings; previous evaluations; background information; conduct and attitude in working with staff, parents and other coaches; interest in young people; ability to teach and develop young players; coaches who serve as an example; general knowledge of the rules; and promotes good sportsmanship.

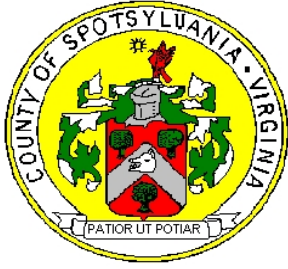
I, the undersigned, authorize and give my consent for the above named organization to obtain information regarding myself. This includes the following: Criminal Background Check, Training/Experience, Personal References. I, the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my volunteer application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

All individuals interested in being a Head Coach will be contacted by a Parks and Recreation staff member. All applications are subject to screening and approval by the Spotsylvania Parks and Recreation Commission.

Signature _____ Date _____

Print Name _____

*****Please read and sign Volunteer Agreement located on the back of this page. It is now mandatory that each volunteer head and assistant coach will need to complete and sign a Volunteer Agreement for the County. PLEASE SUBMIT COACHING APPLICATION BY WEDNESDAY, JUNE 21, 2023.**



Volunteer
AGREEMENT/CONTRACT

If volunteer is under the age of 18, Participation Agreement must be signed by the parent/guardian.

I, (print full name) _____, understand that my participation as a volunteer, is without anticipation of financial payment from the County of Spotsylvania, and does not constitute a contract of hire or apprenticeship between myself and the County of Spotsylvania.

I recognize that I will be representing the County of Spotsylvania’s interests to the general public and agree to abide by the accepted policies, procedures, values, codes, and practices. I will conduct myself in a professional and courteous manner with all Spotsylvania employees and the public at large. I understand that my volunteer position may give me access to sensitive information, I agree to maintain confidentiality on any and all information that may be considered sensitive, personal, or confidential in nature. I understand that this includes, but is not limited to discussing aspects of any investigation, criminal or otherwise.

I understand that my participation in the volunteer program is a privilege and not a right; and that Spotsylvania County may, in its sole discretion, dismiss me from the volunteer program with or without cause.

I am fully aware that there are inherent risks associated with serving as a volunteer, these risks include, but are not limited to, the possibility of bodily injury, physical disability, physical and mental disease, death, and property damage. Understanding these risks, it is still my decision to participate in the volunteer program and in consideration of the County of Spotsylvania allowing me to participate; I assume full responsibility for such risks. I agree that neither I nor my legal representatives, heirs or assigns, will hold the County of Spotsylvania, its officials, employees or agents responsible for any injuries, disabilities, physical and mental disease, death, property damage, or losses and expense of any nature whatsoever that I may sustain as a result of my participation in the volunteer program, whether caused by negligence of the County of Spotsylvania, its officers, employees and agents, or otherwise.

I understand as a volunteer that I am subject to a background check. I give my consent for the County of Spotsylvania to obtain information regarding myself. This includes the following: Criminal Background check, Training and Experience check and Personal references.

I understand that the use of alcohol, illegal drugs, or the misuse of drugs is not acceptable in the volunteer environment for Spotsylvania County. In accordance with this, I understand that I may be required to submit to a drug or alcohol test when there is suspicion to believe I as a volunteer is under the influence of drugs or alcohol while representing Spotsylvania County.

I understand if serving in the capacity of a volunteer coach or mentor role I am required to follow the Standard of Conduct in place as well as the Bylaws in place for the Sport I Volunteer and the Spotsylvania County Policies and Personnel Manual.

<https://www.spotsylvania.va.us/187/Personnel-Policies-Procedures-Manual>

Print Name _____ Signature _____ Date _____

Parent/Legal Guardian – Print Name _____ Signature _____ Date _____

Sport _____ League _____ Contact Phone # _____