

# 86 FSS Youth Programs

## KMC Youth Sports and Fitness Department

### REQUEST FOR LEAGUE ADJUSTMENT

I, (Parent or Legal guardian) \_\_\_\_\_ request that my child

(player name) \_\_\_\_\_ date of birth \_\_\_\_\_

be given consideration to move from age group \_\_\_\_\_ to \_\_\_\_\_.

The reason for moving my child out of his/her age group is: \_\_\_\_\_

\_\_\_\_\_

To Parent/Legal Guardian:

Any player that requests to MOVE UP in an age division MUST complete the sport skill evaluation conducted by the Youth Sports Staff.

Any player the requests to MOVE DOWN in an age division, a letter or recommendation from the doctor in the case of physical adjustment must be submitted. 86 FSS KMC Youth Sport Director must approve this request before the player can participate in the sport program.

Parents should be aware of the risks of allowing their child to participate in the requested age group. If the player's performance is not adequate in the requested age group, Youth Sports Directors have the right to move the player back to the original age group.

\_\_\_\_\_

\_\_\_\_\_

Signature

Date

Office use only.

This request is: \_\_\_\_\_ APPROVED \_\_\_\_\_ NOT APPROVED

\_\_\_\_\_

Youth Sports Director