



## REVIEW LETTER POLICY YOUTH SPORTS

The following policy and procedures have been established to ensure quality programming.

Independence Township Parks, Recreation & Seniors will offer a Review Letter option for your child to play in a league that they do not qualify for based on their age. Our Department offers this option for all of our Youth Sports Leagues.

Parks, Recreation & Seniors will accept Review Letters until a designated Review Letter Deadline. Please see individual league brochure for specific deadline dates. No Review Letters will be accepted after the printed deadline. **NO EXCEPTIONS.**

Once the Review Letter has been turned in to our Department, the Review Board, consisting of Parks, Recreation & Seniors Professionals, will review all requests and make a decision. Review Board decisions are final. No protests will be accepted.

Parents will be notified through a letter of the Review Board's decision. Those children granted approval will be given an allotted amount of time to transfer into the approved league, additional fees may apply. Those children denied approval, will be given an allotted amount of time to request a refund or stay in the league that is appropriate for their age. Refunds must be requested before open registration ends, please see individual league brochures for specific dates.

Special requests and buddy requests, including requests for specific coaches, are not guaranteed when writing a Review Letter. See registration form for details.

Regardless of your choice to utilize the Review Letter Policy, Parks, Recreation & Seniors highly recommends parents to register their child in the league that corresponds with their appropriate age. This will ensure a spot in our program and will keep teams equal and fair according to age.

# REVIEW LETTER FORM

## For Independence Township Parks, Recreation & Seniors Youth Sports

Please print legibly or attached typed information.

CHILD'S NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ YEARS EXPERIENCE: \_\_\_\_\_

LEAGUE(S) PLAYED IN WITH INDEPENDENCE TOWNSHIP IN THE PAST 3 YEARS: \_\_\_\_\_

\_\_\_\_\_

Have we verified your child's age? If no, please attach a birth certificate.

Did you register the child in a league today? If yes, what league? \_\_\_\_\_

SPORT: (Please circle one)      BASEBALL/SOFTBALL      SOCCER      BASKETBALL

Please tell us the reasons why you think your child should play in \_\_\_\_\_ **(League Applying For)**

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I have read and understand the Review Letter Policy (see reverse side)

PARENT'S NAME (Please print): \_\_\_\_\_

PARENT'S SIGNATURE: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

Thank you for your input. We will not review your letter until the Review Letter Deadline. We will contact you by email with a decision.