

# CLINTON COUNTY YOUTH BUREAU

OFFICE ADDRESS: 135 MARGARET STREET, 2<sup>ND</sup> FLOOR

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PLATTSBURGH, NEW YORK 12901

(518) 565-4750

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Christine Peters  
EXECUTIVE DIRECTOR

Terra Sisco  
SUPERVISOR

Nicholas Arnold  
RECREATION DIRECTOR

## AGE WAIVER POLICY

It is the County Recreation Department's policy that youth play on teams in their age appropriate age bracket (i.e., Mite, Pee Wee, Bantam).

An Age Waiver may be requested by a parent/guardian should their child have a specific physical, social or emotional impairment that would make it unsafe for the youth to play at their age appropriate level.

Age Waivers to move down an age bracket are granted on a case-by-case basis. To request an Age Waiver, (a) parent(s)/guardian(s) must submit an Age Waiver Request Form to the Youth Bureau prior to the established deadline. No age waivers will be accepted after the determined deadline even if practices have not started.

## Evaluation Criteria

**An Age Waiver is ONLY appropriate when** it is determined that it is **unsafe** for a player to participate in their age appropriate age bracket, **AND** it is determined that allowing that player to "**play down**" in a younger age group will not pose safety concerns for their fellow players at that level.

**An Age Waiver is NOT appropriate when** requested for the following reasons:

- Youth misses age cutoff date
- Youth wants to play with friends
- Town does not have a team at the age appropriate level.  
(Player may be released to play in another town.)

Youth **CANNOT** be placed on a team, practice or play at a lower age level until the County Recreation Department completes the Age Waiver evaluation.

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## AGE WAIVER REQUEST

### Clinton County Youth Sports Programs

Athletes' Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Town of Residence: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Current grade level in School: \_\_\_\_\_ Current Coach: \_\_\_\_\_

Sports Program (circle only one): *Basketball* *Baseball* *Softball* *Soccer*

(A separate Age Waiver Request is required for each season)

Athletes' age appropriate level of play: \_\_\_\_\_

### Request:

**Specific Reason(s) for Request:** (Please provide information on why the youth is unsafe to play at their age appropriate level.)

Will the athlete be participating in a High School Sports Program (Modified, Junior Varsity, Varsity) for the sport the waiver is requested for?

YES (circle one) NO

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

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### For Youth Bureau Use Only

i. Youth Bureau received Waiver Request on Date \_\_\_\_\_

ii. Youth Bureau conducted Evaluation on Date \_\_\_\_\_

iii. Youth Bureau announced Findings on Date \_\_\_\_\_

Waiver Request was **APPROVED** (circle one) **DENIED**

Reason(s) for above action:

Evaluator: \_\_\_\_\_

Date: \_\_\_\_\_