



YOUTH SPORTS AND FITNESS SUPPLEMENTAL INFORMATION FORM—CNICCYP 1700/68

OPNAVINST 1700.9 (series)

Parent Information									
Name (First, Last)		Phone Number		Email Address					
Youth Information									
Name (First, Last)			Sport			Years of experience			
Sibling Information <small>(CYP will make an effort to align practice and game days for siblings.)</small>									
Sibling Participation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Sibling Name(s) (First, Last)						
Uniform Sizing Information									
Typical Top Size (Check one)	Youth	XS <input type="checkbox"/>	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>			
	Adult	XS <input type="checkbox"/>	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>			
Typical Bottom Size (Check one)	Youth	XS <input type="checkbox"/>	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>			
	Adult	XS <input type="checkbox"/>	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>			
Preferred Practice Days (indicate available or not available) <small>**Does not guarantee scheduling**</small>									
Monday	Tuesday	Wednesday	Thursday	Friday					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PCS Date		Last Date Available							
Preferred Coach <small>**Does not guarantee placement**</small>									
Parent Volunteer Information <small>**Discounts may be available to families with parent volunteers**</small>									
Interested in volunteering as a (check all that apply):	Coach	<input type="checkbox"/>	For the following sport: (Check all that apply)	Baseball/Softball	<input type="checkbox"/>	For the following ages (check all that apply):	3-5	<input type="checkbox"/>	
				Basketball	<input type="checkbox"/>		6-12	<input type="checkbox"/>	
				Cheerleading	<input type="checkbox"/>		13-18	<input type="checkbox"/>	
				Flag Football	<input type="checkbox"/>				
				Soccer	<input type="checkbox"/>				
				Other:					
				Baseball/Softball	<input type="checkbox"/>		3-5	<input type="checkbox"/>	
				Basketball	<input type="checkbox"/>		6-12	<input type="checkbox"/>	
				Cheerleading	<input type="checkbox"/>		13-18	<input type="checkbox"/>	
				Flag Football	<input type="checkbox"/>				
				Soccer	<input type="checkbox"/>				
				Other:					
		Baseball/Softball	<input type="checkbox"/>	3-5	<input type="checkbox"/>				
		Basketball	<input type="checkbox"/>	6-12	<input type="checkbox"/>				
		Cheerleading	<input type="checkbox"/>	13-18	<input type="checkbox"/>				
		Flag Football	<input type="checkbox"/>						
		Soccer	<input type="checkbox"/>						
		Other:							
Volunteer Shirt Size <small>(Specify typical adult top size)</small>		XS <input type="checkbox"/>	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>			



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Instructions for Completing the Supplemental Youth Sports and Fitness Information Form (for sports leagues)

This is a supplemental form to be completed by parents whose youth are participating in seasonal sports leagues. This form precludes the need for families to fill out an additional *Registration Form—CNICCYP 1700/04* for each sport signup. This form should be used in conjunction with the youth's *Registration Form* currently on file. It is a fillable form that can be completed online.

1. A separate *YSF Supplemental Information Form* must be completed for each youth who is being registered for a sport. The YSF program will use the youth's registration form for additional information as needed.
2. The parent must complete all the applicable information about the family and/or youth.
3. Enter the names of other siblings and if the sibling(s) is participating on the team in addition to youth being registered. If a sibling is playing another sport at the same time, indicate that as well. CYP will try to match siblings to practices on the same day(s).
4. The parent must choose the youth's uniform size, preferred practice days, and preferred coach (if any). There is no guarantee of preferred coach placement.
5. **PCS date:** If you know your PCS date, enter that date and the last date your youth will be available for the team.
6. **Parent volunteers:** Check what type of volunteer you would like to be and the type(s) of sport for which you want to volunteer. Choose all sports that apply. Also choose the age group(s) of the sports team that you prefer. Choose all age groups that apply.
7. **Parent volunteer shirt size:** Choose shirt size needed.