## NORTH PLATTE UNITED SOCCER CLUB CALENDAR YEAR PLAY UP RISK ACKNOWLEDGEMENT FORM

The North Platte United Soccer Club encourages all players to challenge themselves in practice and during competition in order to improve their individual soccer skills, which in turn will help them contributed in a positive manner to their respective team. As part of this effort, a player may desire to "play up" on a team with older players or have the opportunity to play in a tournament against teams that field older players. Playing up is a recognized and acceptable practice by the national and state soccer organizations that the club belongs to. However, when a player elects to compete against older players, it is important for a player and a player's parent(s) or guardian(s) to be knowledgeable and recognize that there are some increased risks to a player playing older players in practice and/or a tournament.

Several new US Youth Soccer requirements, recommendations, and guidelines have been recently issues that are based in part on the increased identification of potential health risks in youth sports due to younger players playing against older players. The club must follow and enforce new requirements, where mandated, and incorporate and adjust club policies and guidelines based on the recommendations and guidelines of the national and state governing bodies over the sport.

In the effort to increase awareness of this issue, as of August 1, 2017, it is required by the North Platte United Soccer Club that a club player his/her parent(s) and / or guardian(s) carefully consider the potential increased risk to a player's health and playing time by playing on an older calendar year age group team or participating in a practice or tournament game setting against a team with older players. It is also required that the player's parent(s) and / or guardian(s) clearly identify to the North Platte United Soccer Club whether or not they accept these risk factors.

To identify the player and their parent(s) or guardian's position on this issue, the Calendar Year Play Up Risk Acknowledgement Form must be:

- 1. Completed and filled out in full by the parent(s) and / or guardian(s) for the listed player that identifies whether they are acceptable with having their player play up in a calendar age group team or to have their player practice or play against an older calendar age group team.
- 2. Signed and dated by the player's parent or legal guardian.
- 3. The original of the Calendar Year Play Up Risk Acknowledgment Form, as well as Attachments A and B shall be turned back in to the Club's Secretary or Coaching Director prior to the player participating in practice, games, or similar after August 1, 2017.

No player will be allowed to participate in club team practice or game settings without this form and its attachments being properly signed and on file in the club's records.

## NORTH PLATTE UNITED SOCCER CLUB CALENDAR YEAR PLAY UP RISK AND ACKNOWLEDGMENT FORM

PLAYER'S NAME (type or print):
PLAYER'S DATE OF BIRTH (mm/dd/yyyy):
,(player's parent/legal guardian), in consideration for my
child's voluntary participation in organized soccer, do hereby willfully acknowledge that my signature
pelow attests to my understanding and agreement that practicing or playing up on a team with an older
calendar age group <b>OR</b> against a team with older calendar year age group players as defined by US
Youth Soccer could:

- Pose an increased risk of injury to the player due to practicing or playing with and against older players who may be bigger, faster, stronger, and more skilled, and specifically, an increased risk of head injury, concussion, fractures, sprains, neck and spinal injuries and strains, and ligament and tendon injuries and
- Result in potentially less playing time in game settings compared to older players on the team who may be bigger, faster, stronger, and more skilled.

Soccer is a physical, contact, sport that involves the risk of injury. I assume all risks and hazards associated with my child's participation in the sport and due to playing on or against a team in either practice or a game setting that fields players who are older than my child's birth year age group. My child is in proper physical condition to participate in soccer practices and games against players who are at an older age group level and has no illness, disease or existing injury or physical defect that would be aggravated by my child's participation. I will promptly inform my child's coach if this status changes. I further acknowledge that this risk may involve loss or damage to my child or my child's property, including the risk of death, or other unforeseen consequences, including those which may be due to the unavailability of immediate emergency medical care. I have a current medical consent form on file with the team coach. I will ensure my child will wear shin guards, properly-fitted and appropriate shoes, and other protective equipment (e.g., mouth-pieces), as required by recognized soccer rules, to all practice or game events.

The club does not have personal injury insurance that covers my child's participation. Therefore, I should have a current, active, personal injury insurance policy in force, which covers my child's participation. Under any condition, I am responsible for any and all medical expenses arising from my child's participation, both in practices and games and while travelling to and from these events. I have the right and responsibility to inspect the equipment and facilities prior to events and, if I believe that anything may

be unsafe, I will advise the coach or referee of the game of the condition and may refuse to allow my child to participate. Participation assumes consent.

I authorize that an unaltered signed copy of this form will be generated and maintained in the North Platte United Club's records to document that I have been informed of the potential increased risk to health and playing time by choosing to practice and / or play on or against a team that is in an older age group than my child's birth year age group.

I hereby release, waive liability, discharge, hold harmless, indemnify, and covenant not to sue, Nebraska State Soccer, the North Platte United Soccer club, and their associated directors, administrators, officers, managers, employees, coaches, trainers, volunteers, sponsors and advertisers, and other agents, estates or executors, from any and all liability incurred in the conduct of, and my participation in, their soccer programs. This includes owners, lessors, and lessees of premises, municipalities, government agencies, successors, heirs, and assigns.

I have completely read this document and fully understand its contents. I acknowledge that I have given
up substantial rights by accepting this document and that I do so voluntarily. My signature attests to this
on behalf of myself and my executors, personal representatives, administrators, heirs, next-of-kin,
successors, and assigns.

Parent or Guardian Signature

Parent or Guardian Name (PRINT)

**Date Signed** 

## ATTACHMENT A - PLAYING UP ON A CLUB TEAM

The North Platte United Soccer Club allows players to "play up" on a calendar year age group team on a limited basis as defined in the Club's Bylaws and policies. The term "playing up" with regards to its use in this document is defined as a player playing on a team with a calendar year designation that is older than their respective birth year. (Example: A player with a calendar year birth year of 2006 practicing or playing on a team with players that have a calendar birth year of 2005 or older.)

For those in	dividuals under the age of $\epsilon$	eighteen (18) years (minor):		
	As the parent and natural g	juardian or legal guardian of the part	icipant, I hereby accept and	
	agree to the foregoing Wa	aiver of Liability and Release for t	he player named above to	
	play up on a club team in	an older calendar age group. I he	reby bind myself, the minor,	
	and all other assigns to the	terms of the Waiver of Liability and	Release. I represent and	
	certify that I have the legal	capacity and the authority to act for,	and on behalf of, the minor in	
	the execution of this Waive	r of Liability and Release.		
	I request that my player be	allowed to practice and play up on t	he following North Platte	
	United Soccer Club Team:			
	for the following reason(s):			
	As the perent and petural of	wardian or logal guardian of the part	inipant. I do not agree to the	
	As the parent and natural guardian or legal guardian of the participant, I do not agree to the foregoing Waiver of Liability and Release for the player named above to play up on a			
		endar age group. My desire is to h		
		eam in an age group which match	•	
	birth year. I represent and	certify that I have the legal capacity	and the authority to act for,	
	and on behalf of, the minor	in the execution of this Waiver of Lia	ability and Release.	
	I request that my player be	allowed to practice and play and on	the following North Platte	
	United Soccer Club Team:			
Parent or G	uardian Name (PRINT)	Parent or Guardian Signature	Date Signed	

## ATTACHMENT B - PLAYING UP IN A PRACTICE, GAME, OR TOURNAMENT

For those individuals under the age of eighteen (18) years (minor): As the parent and natural guardian or legal guardian of the participant, I hereby accept and agree to the foregoing Waiver of Liability and Release for the listed player to practice or play in a game or tournament setting against a team(s) that utilize player(s) in an older calendar age group. I hereby bind myself, the minor, and all other assigns to the terms of the Waiver of Liability and Release. I represent and certify that I have the legal capacity and the authority to act for, and on behalf of, the minor in the execution of this Waiver of Liability and Release. As the parent and natural guardian or legal guardian of the participant, I do not agree to the foregoing Waiver of Liability and Release for the listed player to practice or play in a game or tournament setting against a team(s) that utilize player(s) in an older calendar age group. I represent and certify that I have the legal capacity and the authority to act for, and on behalf of, the minor in the execution of this Waiver of Liability and Release. Parent or Guardian Name (PRINT) Parent or Guardian Signature Date Signed