SEASONAL WAIVER

\*\*\*\*BE SURE TO READ ALL SECTIONS BEFORE CHECKING!\*\*\*\*\*

1. I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of the US Youth Soccer association (USYA), its affiliated organizations and sponsors. I understand it is my responsibility to promote good sportsmanship by setting a positive example for the youth participating in the Club and that failure to do so will result in disciplinary actions. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA, accepting the registrant for its soccer programs and activities (the "programs"), I hereby release, discharge and /or otherwise indemnify the USYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs and /or being transported to and from the game, which transportation I hereby authorize. As the parent or legal guardian of the above-named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.  I hereby acknowledge that all information provided on this application is complete and accurate to the best of my ability.

2. I hereby give approval for the participation of my child in any and all Georgia State (GSSA) and Columbus Youth Soccer Club (CYSC) activities and I assume all risk and hazards incident to such participation, including transportation to and from said activities, waive, release, absolve, indemnify and agree to hold harmless GSSA and CYSC, the organizers, supervisors, officers, directors, participants and person or parents supervising or transporting participants to or from such activities from any claims arising out of injury to my child. I understand that a player who registers with CYSC is bound to CYSC for the entire seasonal year, unless a transfer is requested.

3. By registering my child with CYSC, I understand that his or her picture may be used in promotions.

4. It is a state rule that we verify the birth date of each player. You must provide this in order for your child to play. Please mail a copy to P.O. Box 7366 Columbus GA 31908 or drop off a copy at the office before Opening Day, March 2, 2024

5. By registering and paying you agree that the player registered will play for CYSC only and for no other soccer organization for said season.

6.. It is the policy of CYSC that NO refunds will be given after the close of Registration January 22, 2024

7.  I understand concussions are possible in youth sports, and that no additional liabilities or responsibilities on the part of Columbus Consolidated Government or its Department of Parks and Recreations are created by the furnishing of this information. I understand that a fact sheet is available under the Player's Portal on the CYSC Website.

8.  Many of our competition rules are covered by the Laws of the Game. FIFA laws of the Game.

9. Risk Management is the collection of actions taken by Georgia Soccer and its affiliates to minimize risk associated with the playing and administration of the game of soccer. Georgia Soccer’s Risk Management Committees role is to study the areas where risk may exist and to propose policy and education to mitigate that risk. Risk Management addresses a number of issues which include, but are not limited to, background checks for those involved with youth players, field and game safety and the protection of the state association and of each member organization and their assets. Please use these resources to assist in mitigating risk for your organization. Background Screening Georgia Soccer requires all coaches, volunteers, trainers, administrators, and staff over 18 years of age to have a background check every 2 years.

10. Risk Management is the collection of actions taken by Georgia Soccer and its affiliates to minimize risk associated with the playing and administration of the game of soccer. Georgia Soccer’s Risk Management Committee’s role is to study the areas where risk may exist and to propose policy and education to mitigate the risk. Risk Management addresses a number of issues which include, but are not limited to, background checks for those involved with youth players, field and game safety and the protection of the state association and of each member organization and their assets. Please use these resources to assist in mitigating risk for your organization. CDC Concussion Fact Sheet

Concussion Awareness and Return to play policy

Certification of Healthcare Provider Form

Return to Play Procedure

Return to play authorization

11. Georgia Soccer Rules, Bylaws and Policies

As a member of Georgia Soccer, we request that you review the rules of competition in our association.

12. Risk Management is the collection of actions taken by Georgia soccer and its affiliates to minimize risk associated with the playing and administration of the game of soccer. Georgia Soccer’s Risk Management Committee’s role is to study the areas where risk may exist and to propose policy and education to mitigate that risk. Risk Management addresses a number of issues which include, but are not limited to, background checks for those involved with youth players field and game safety and the protection of the state association and of each member organization and their assets. Please use these resources to assist in mitigating risk for your organization. Policy: Sudden Cardiac Arrest Awareness and Return to play Policy

Return to Play Authorization

Parent and Athlete Fact Sheet

Medical Treatment Refusal

 I agree to the above terms and conditions

Parent Signature