



# Club Approval Form

## 8U-15U Play Up

### 2019/20

MYSA Policy 5-500-A states “It is the Policy of MYSA that all players compete at a level they are capable of physically, emotionally and developmentally.”

MYSA Policy 5-500-B states “Players between the 8U age group and the 15U age group shall be permitted to play up two (2) age groups if approved by the player’s club.”

This form, when complete, shall serve as the club’s formal approval to allow the younger player named below in Section A to play up two (2) age groups on a team within their club. This completed form shall be stored electronically and/or physically for record-keeping purposes and must be shared with MYSA should it be requested.

A. PLAYER INFORMATION		
PLAYER NAME	GOTSOCCKER PLAYER ID NO. <b>MT -</b>	
DATE OF BIRTH	CURRENT AGE	
CLUB NAME	PLAY UP TEAM NAME & GENDER	PLAY UP TEAM AGE GROUP

B. TO BE COMPLETED BY PARENT / LEGAL GUARDIAN	
PARENT / LEGAL GUARDIAN NAME	RELATIONSHIP TO PLAYER
EMAIL	TELEPHONE
<p><b>CONSENT AGREEMENT</b></p> <p><i>I, as parent / legal guardian, am aware that my younger player, named above in Section A, will be playing against older, usually more developed players whose soccer skills may be more advanced and whose play may be more physical than that of my younger player.</i></p> <p><i>I have considered my younger player’s maturity, size, physical development, attitude and social development in comparison to the players of true age that my younger player will likely play with and against while playing up.</i></p> <p><i>As parent / legal guardian, I give my permission for my younger player to play up on the Play Up Team at the Play Up Team Age Group provided in Section A above. This consent will apply to only the 2019/20 season.</i></p> <p><i>In granting my permission, I release Montana Youth Soccer Association (MYSA) and US Youth Soccer Association (USYSA) from all responsibility should my child be injured, no matter the severity, while a member of the Play Up Team. I will not hold MYSA or USYSA liable for any injuries that might occur.</i></p>	
PARENT / LEGAL GUARDIAN SIGNATURE	DATE

C. TO BE COMPLETED BY CLUB	
CLUB ADMINISTRATOR NAME	CLUB ADMINISTRATOR ROLE
<p><b>CONSENT AGREEMENT</b></p> <p><i>My club is aware that this younger player, named above in Section A, will be playing against older, usually more developed players whose soccer skills may be more advanced and whose play may be more physical than that of this younger player.</i></p> <p><i>My Club agrees this younger player is capable physically, emotionally and developmentally to play up.</i></p> <p><i>My club approves this younger player to play on the Play Up Team at the Play Up Team Age Group provided in Section A above. This consent will apply to only the 2019/20 season.</i></p>	
CLUB ADMINISTRATOR SIGNATURE	DATE