

## ILLINOIS YOUTH SOCCER ASSOCIATION (IYSA)

## 2020 NON-IYSA/US YOUTH SOCCER & FOREIGN TEAM AGREEMENT

## The Team must complete and submit this form to The Tournament Host at The Tournament registration!

IYS A	A Sanctioned Tournament (The Tournament)	Tournament Date(s)
The '	Tournament Host	
Tour	nament Location	
The '	Team	Age U Check One:   Boys or   Girls
		Cell Phone ()
		Email
City,	State, Zip	
US S	soccer Affiliation/Poleigh soccer redefation Affiliation	
I, the	e undersigned Team Coach, Manager, and/or Authoriz	zed Representative of The Team certify I that am authorized to
	duct business on behalf of the Team.	
1.	If The Team is not an IYSA/USYSA/USSF Member Orga	anization team, I agree to submit to the Tournament Host at registration a
		urnament dates naming the Illinois Youth Soccer Association (hereinafter
	known as IYSA) and The Tournament Host as additional is	
2.	the US Soccer affiliate to participate in The Tournament.	oof that The Team, including its players and coaches, has permission from
3.	I understand and agree that The Team, its members and arising out of The Team's participation in The Tournamer	related individuals are NOT covered by IYSA insurance for incidences t.
4.	I agree to submit to the Tournament Host at registration a p Release & Liability Waiver for each of The Team's player	arent/guardian completed, signed and unaltered IYSA Emergency Medica's.
5.		have a current valid player pass from The Team's US Soccer Member
	I understand that these passes must be the original laminat	nat I have to present these passes to The Tournament Host at registration ed or plastic passes. The coach's pass must include the coach's name and the order of high
6.	photo. The player's pass must include the player's name, I	adults that have regular contact with or authority over and/or have access
		ted and passed within the current year a background search that complies
7.		Centers for Disease Control (CDC) Heads Up Concussion in Youth Sports
	Training Certificate.	centers for Disease control (CDC) fredas op concussion in Touri Sport.
8.	e e e e e e e e e e e e e e e e e e e	adults that have regular contact with or authority over and/or have access Center for SafeSport Training Certificate.
9.		n a copy of The Team's current certified, official US Soccer Member
10.	•	ay participate in The Tournament and that no roster changes will be
11.		, players and everyone affiliated with The Team shall abide by the rules
I acknow IYSA app Foreign property manager reasonal following	olf of The Team I understand and agree to abide by all the requirements selvedge and understand that the players and coaches of The Team are not coproved tournament (The Tournament) and further certify that I have insursoccer Federation. I further understand that neither the IYSA nor US Your sustained in the course of this approved event. On behalf of The Team I was semployees, agents, associated personnel, affiliated organizations, and subject that arise out of any and all allegations asserted in any was whether actual or alleged: (a) any bodily injury, including death, to person.	forth in this Agreement and certify that the information provided by me is true and correct overed by IYSA insurance for injuries and claims arising of The Team's participation in thi. ance coverage for all of The Team's members from the US Soccer affiliated organization outh Soccer or their Affiliates are liable for transportation, lodging, or injury to persons outless agree to defend, indemnify and hold harmless the IYSA, its officers, directors, coaches ponsors from and against any and all liabilities, losses, fines, penalties, costs, expenses and third party claim, demand, suit, or cause of action or proceeding arising out of any of the ons or damage or loss of property which result in whole or in part from any act or omission st carrying out its obligations under this Agreement; and (b) any breach of this Agreement.

Print Name

Signature

Date

Title