



# Plateau Soccer Club Registration Form

TODAY'S DATE \_\_\_\_\_

FEE PAID \$ \_\_\_\_\_

Uniform \$ \_\_\_\_\_

CASH  CHECK# \_\_\_\_\_

Payable to Plateau Soccer Club

(PLEASE PRINT)

PLAYERS LAST NAME \_\_\_\_\_ PLAYERS FIRST NAME \_\_\_\_\_

MALE  FEMALE

DATE OF BIRTH (mm/dd/yyyy) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME TELEPHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

FATHER: LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

MOTHER: LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

PREFERRED EMAIL \_\_\_\_\_

EMERGENCY CONTACT OTHER THAN ABOVE: NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

List any medical issues or allergies the Coach needs to be aware of \_\_\_\_\_

Special requests (play with sibling, etc.): \_\_\_\_\_

- YOUTH X-SMALL   
  YOUTH SMALL   
  YOUTH MEDIUM   
  YOUTH LARGE   
  YOUTH X-LARGE  
 ADULT SMALL   
  ADULT MEDIUM   
  ADULT LARGE   
  ADULT XL   
  ADULT XXL

The above-named child and the undersigned parent and/or guardian of the above-named child, understand and acknowledge that youth sports entail both known and unknown risks, including, but not limited to, physical and emotional injury. Knowing these risks, the undersigned assumes full responsibility and to voluntarily participate in youth sports with Crossville Parks & Recreation. The undersigned, individually and on behalf of the above-named child, hereby voluntarily and expressly release, indemnify, forever discharge and hold harmless the Plateau Soccer Club (herein PSC) (including its coaches, administrators and referees), and the City of Crossville (the "Released Parties) from any and all liability, claims, demands, causes or rights of action, whether personal to the undersigned, to the above named child, or to a third party which are in any way connected with the above-named child's participation in PSC.

The City of Crossville Youth Sport Associations seek to instill positive character-building traits in our communities' youth through the demonstration of good sportsmanship, respect for others, responsibility, fairness, caring and good citizenship. We ask that parents and their guests attending PSC sponsored events help us by reflecting these character traits at games. When attending PSC sponsored events, I therefore agree: \*I will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event. \*I will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing, taunting or using profane language or gestures, etc. There is zero tolerance for physical violence. \*I will not encourage any behaviors or practices that would endanger the health and wellbeing of the athletes. \*I will teach my child to play by the spirit of the rules and to resolve conflicts without resorting to hostility or violence. \*I will demand that my child treat other players, coaches, officials and spectators with respect regardless of race, sex, or ability. \*I will never ridicule or yell at my child or other participant for making a mistake or losing a competition. \*I will respect the officials and their authority during games and will never question, discuss, or confront coaches or referees at the game field, and will take time to speak with coaches at an agreed upon time and place. \*I will refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team. \*I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.

I also agree that if I fail to abide by the aforementioned rules and guidelines, I will be subject to disciplinary action that could include, but is not limited to the following: \*Verbal warning by official, head coach, and/or member of the PSC organization \*Parental game suspension with written documentation of incident \*Indefinite parental suspension

Signature \_\_\_\_\_ Parent or Guardian Print Name \_\_\_\_\_

I AM INTERESTED IN BECOMING:

SPONSOR  
(Additional form required)

Sponsor Name \_\_\_\_\_

PSC reserves the right to use any photograph/video taken at any event sponsored by PSC, without the expressed written permission of those included within the photograph/video. PSC may use the photograph/video in publications or other media material produced, used or contracted by PSC including but not limited to Facebook.

## TSSA Concussion Information for Parents/Legal Guardians

Public Chapter 148, effective January 1, 2014, requires that school and community organizations sponsoring youth athletic activities establish guidelines to inform and educate coaches, youth athletes and other adults involved in youth athletics about the nature, risk and symptoms of concussion/head injury.

**WHAT IS A CONCUSSION?** Concussion is a type of traumatic brain injury caused by a bump, blow or jolt to the head. Concussions can also occur from a blow to the body that causes the head and brain to move quickly back and forth, causing the brain to bounce around or twist within the skull. This sudden movement of the brain can cause stretching and tearing of brain cells, damaging the cells and creating chemical changes in the brain. **DID YOU KNOW?** → Most concussions occur without loss of consciousness. → Athletes who have, at any point in their lives, had a concussion have an increased risk for another concussion. Young children and teens are more likely to get concussions and take longer to recover than adults.

**WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?** Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If an athlete reports one or more symptoms of concussion listed below after a bump, blow or jolt to the head or body, he/she should be kept out of play the day of the injury and until a *health care provider\** says he/she is symptom-free and it's OK to return to play.

### **Signs Observed by Coaching Staff**

→ Is confused about assignments or position → Forgets instruction → Is unsure of game score or opponent → Moves clumsily → Answers questions slowly → Loses consciousness even briefly → Shows mood, behavior or personality changes → Can't recall events prior/after hit or fall.

### **Symptoms Reported by Athletes**

→ Nausea or vomiting → Balance problems or dizziness → Double or blurry vision → Sensitivity to light and/or noise → Feeling sluggish, hazy, foggy or groggy → Concentration or memory problems → Confusion or just not "feeling right" or "feeling down"

**CONCUSSION DANGER SIGNS** In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention after a bump, blow or jolt to the head or body if he/she exhibits any of the following danger signs: → One pupil larger than the other → Convulsions or seizures → Is drowsy or cannot be awakened → Cannot recognize people or places → A headache that not only doesn't diminish, but gets worse → Becomes increasingly confused, restless or agitated → Weakness numbness or decreased coordination → Has unusual behavior → Repeated vomiting or nausea → Loses consciousness (even a brief loss of consciousness should be taken seriously) → Slurred speech

**WHY SHOULD AN ATHLETE REPORT HIS OR HER SYMPTOMS?** If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, he/she is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brains. They can even be fatal. Remember: Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

**WHAT SHOULD YOU DO IF YOU THINK YOUR ATHLETE HAS A CONCUSSION?** If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep the athlete out of play the day of the injury and until a *health care provider\** says he/she is symptom-free and it's OK to return to play. Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration such as studying, working on the computer or playing video games may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.

### **Athlete & Parent/Legal Guardian Concussion Statement**

I have read the concussion symptoms on this sheet. After Reading the Concussion Information Form for Parent/Legal Guardian, I am aware of the following information: (1) A concussion is a brain injury which should be reported to parents, coach or a medical professional if one is available. (2) A concussion cannot be "seen". Some symptoms might be present right away. Other symptoms can show up hours or days after an injury. (3) I will not permit my child to return to play in a game or practice if a hit to the head or body causes any concussion-related symptoms. (4) I acknowledge my child will need written permission from a *health care provider\** to return to play or practice after a concussion. (5) Most concussions take days or weeks to get better. A more serious concussion can last for months or longer. (6) After a bump, blow or jolt to the head or body an athlete should receive immediate medical attention if there are any danger signs such as loss of consciousness, repeated vomiting or a headache that gets worse. (7) After a concussion the brain needs time to heal. I understand that my child is much more likely to have another concussion or more serious brain injury if returning to play or practice occurs before the concussion symptoms go away. (8) Sometimes repeat concussion can cause serious and long-lasting problems and even death.

*\* Health care provider means a Tennessee licensed medical doctor, osteopathic physician or a clinical neuropsychologist with concussion training or physician assistant who is a member of a healthcare team supervised by a Tennessee licensed medical doctor or osteopathic physician.*

## Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet for Athlete/Parent/Guardian

**What is sudden cardiac arrest?** Sudden cardiac arrest (SCA) is when the heart stops beating suddenly and unexpectedly. When this happens, blood stops flowing to the brain and other vital organs. SCA doesn't just happen to adults; it takes the lives of students too. However, the causes of sudden cardiac arrest in students and adults can be different. A youth athlete's SCA will likely result from an inherited condition, while an adult's SCA may be caused by either inherited or lifestyle issues. SCA is NOT a heart attack. A heart attack may cause SCA, but they are not the same. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the heart to suddenly stop beating.

**How common is sudden cardiac arrest in the United States?** SCA is the #1 cause of death for adults in this country. There are about 300,000 cardiac arrests outside hospitals each year. About 2,000 patients under 25 die of SCA each year. It is the #1 cause of death for student athletes.

**Are there warning signs?** Although SCA happens unexpectedly, some people may have signs or symptoms such as fainting or seizures during exercise, unexplained shortness of breath, dizziness, extreme fatigue, chest pains or racing heart. These symptoms can be unclear in athletes since people often confuse these warning signs with physical exhaustion. SCA can be prevented if the underlying causes can be diagnosed and treated.

**What are the risks of practicing or playing after experiencing these symptoms?** There are risks associated with continuing to practice or play after experiencing these symptoms. When the heart stops, so does the blood that flows to the brain and other vital organs. Death or permanent brain damage can occur in just a few minutes. Most people who experience SCA die from it.

**Public Chapter 325 - the Sudden Cardiac Arrest Prevention Act** The act is intended to keep youth athletes safe while practicing or playing. The requirements of the act are: All youth athletes and their parents or guardians must read and sign this form. It must be returned to the school before participation in any athletic activity. A new form must be signed and returned each school year.

**Adopted from PA Dept. of Health: Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet and Acknowledgment of Receipt and Review Form. 7/2013**

The immediate removal of any youth athlete who passes out or faints while-participating in an athletic activity or who exhibits any of the following symptoms: (1) Unexplained shortness of breath; (2) Chest pains (3) Dizziness (4) Racing heart-rate or (5) Extreme fatigue: and → Establish a policy that a youth athlete who has been removed from play shall not return to the practice or competition during which the youth athlete experienced symptoms consistent with sudden cardiac arrest. Before returning to practice or play in an athletic activity, the athlete must be evaluated by a Tennessee licensed medical doctor or an osteopathic physician. Clearance to full or graduated return to practice or play must be in writing.

I have reviewed and understand the parent/guardian guidelines for concussion and sudden cardiac arrest for my student athlete. I understand the symptoms and warning signs and agree to take appropriate precautions.