#### 2021/2022 Cloverleaf Soccer Travel Packet

Congratulations, your child has been placed on a Cloverleaf Travel Soccer Team. This packet is designed to go over the next steps in the Travel Process.

The next steps are as follows.

- Go to <u>www.cloverleafsoccer.com</u> and register your child for the Fall or Fall and Spring Travel Season. There are two options for registration. You can register for the Fall Season only (\$75) or you can register for both the Spring and Fall (\$150). Note that if your register for both seasons now, you only pay one convenience fee (3% plus \$ 3.00) if you pay on-line. You can also pay by check to avoid this fee. If your child is only going to play Spring, then you don't have to register them at this time and can wait until next year.
- 2) If your child is new this year, or if your child has outgrown their uniform, the next step is to fill out the Cloverleaf Soccer Travel Uniform Order Form. Unlike rec, Travel uniforms are not part of registration and parents have to purchase separately. The uniforms typically last 2 to 3 seasons. The cost for the full kit is \$ 69. You'll get a Green Jersey, Green Shorts, a white conflict T-Shirt and socks. If you're child has outgrown their shirt or shorts, there is an a la carte option as well. We'll need to place the Travel Uniform order by July 1<sup>st</sup> in order to guarantee it will arrive by the start of the season. If you have any questions or concerns, you can reach out to your coach.
- 3) All new and returning players will need to do the following.
  - a. Fill out US Club form R-002 that can be found later in this packet.
  - Review the Lindsey's Law information found later in this packet and at <u>https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/lindsays-law/lindsays-law.</u> law. Print out and sign the enclosed Lindsey's Law Signature Form.
  - c. Review the Ohio Return to play concussion information found later in this packet.
  - d. Review the Cloverleaf Soccer Parent's code of conduct form.
  - e. Provide a headshot picture of your child.
- 4) New players We will also need a copy of your child's birth certificate.

You can gather the information above (R-002 Form, Lindsey's Law Form, Picture and for new players birth certificate) and scan them to Mark Van Meter at <a href="markvm@aol.com">markvm@aol.com</a> or you can drop the forms off at one of three drop off dates we'll have in the next three weeks. In addition to dropping off forms, we'll have samples of uniform shirts and shorts that you can use for sizing. We'll take a picture of your child and you can pay your fees by check to avoid the convenience fee charged on line.

Form Collection Dates:

Tuesday June 15th from 6:00 to 7:00 at the CSA Fields Monday, June 21<sup>st</sup> from 6:00 – 7:00 at the CSA Fields

Thursday June  $24^{th}$  from 6:00 – 7:00 at the CSA Fields



#### <u>FORM R002 | 2021-22 REGISTRATION YEAR</u> Player Information, Medical Treatment Authorization, Liability Waiver/Release and Consent Form

To be retained by the US Club Soccer member organization for at least five (5) years or until the player's 18th birthday, whichever occurs last.

Member Organization / Club Na	ame:	OHTSL / Cloverleaf Soccer Association	State: OH	
<u>Player information</u> : Full name:		Birth Date:	Gender: 🗌 Female 🗌 Male	
Street address:		City:		
State:	ZIP Code:	Email address (for adult player only):		
Allergies:				
Other medical conditions:				
Physician:		Phone #1: ()	Phone #2: ( )	
Medical/Hospital Insurance Com	pany:		Phone #: ( )	
Policy Holder's Name:			Policy Number:	
To be completed for non-adult Parent/Guardian #1 Name:	<u>players</u> :	Phone #1: ()	Phone #1 Type:	
Email Address:		Phone #2: ()	Phone #2 Type:	
Parent/Guardian #2 Name:		Phone #1: ()	Phone #1 Type:	
Email Address:		Phone #2: ()	Phone #2 Type:	
In an emergency, for an adult player or when a parent/guardian cannot be reached, please contact the following:         Name:       Phone #1:       ( )       Phone #2:       ( )				
Name:		Phone #1: ()	Phone #2: ()	

In signing below, I hereby consent to the above-named member organization/club registering me or my child or guardian, as applicable, with US Club Soccer. I understand that a player may be registered to only one US Club Soccer member organization/club at any time.

<u>Medical Treatment Authorization and Liability Waiver/Release</u>: I hereby give my consent, on my own behalf or on behalf of my child or guardian, as applicable, to have an athletic trainer, coach, team manager, emergency medical technician, physician, nurse, dentist, or other healthcare professional and, in each case, their associated personnel provide the player identified above with medical assistance and/or treatment and agree to be financially responsible for the cost of such assistance and/or treatment. I understand treatment for injury will be based, at least in party, on information provided herein. I hereby authorize emergency transportation of the player, at player or parent/guardian's expense, to a healthcare facility should an individual listed above consider it to be warranted. I acknowledge and understand that certain risks of injury (including, but not limited to, concussions, other serious bodily injury or death) are inherent in playing soccer. These types of injuries may result from the player's actions, the actions or inactions of others, or a combination of both. In signing below, I certify that the player received all necessary medical clearances to participate fully in all US Club Soccer programs without restriction or condition. To the maximum extent permitted by law, I hereby agree to release, waive, hold harmless and indemnify the member organization, the National Association of Competitive Soccer Clubs (dba US Club Soccer), its agents, contractors and sponsors, U.S. Soccer and its affiliated organizations, and the employees and associated personnel of these organizations, against any claim by or on behalf of the player named above as a result of the player's participation in US Club Soccer programs and/or being transported to or from the same, which transportation I hereby authorize.

<u>Privacy Policy & Terms of Use</u>: I acknowledge and agree that I have read, understand and agree to US Club Soccer's Privacy Policy & Terms of Use (collectively, the "Policy"), available at usclubsoccer.org. The Policy describes US Club Soccer practices for collecting, maintaining, protecting and disclosing player information. In signing below, you agree on your own behalf or on behalf of your child or guardian, as applicable, to the provisions of the Policy.

<u>AGREED AND ACCEPTED</u>: I hereby agree and accept all terms and conditions set forth in this Player Information, Medical Treatment Authorization, Liability Waiver/Release, and Consent Form.

Signature of player (if an adult) or parent/guardian (if player is a minor)

Relation to player (if applicable)

Printed name of signee

Date

IMPORTANT NOTICE: ALL PLAYERS, PARENTS AND GUARDIANS ARE BOUND BY AND MUST COMPLY WITH ALL US CLUB SOCCER POLICIES AND RULES WHICH CAN BE FOUND ON THE US CLUB SOCCER WEBSITE [usclubsoccer.org]. A copy of this Player Information, Medical Treatment Authorization, Liability Waiver/Release, and Consent Form can be found at usclubsoccer.org.

# Sudden Cardiac Arrest and Lindsay's Law Information for the Youth Athlete and Parent/Guardia

- Lindsay's Law is about Sudden Cardiac Arrest (SCA) in youth athletes. This law went into effect in 2017. SCA is the leading cause of death in student athletes 19 years of age or younger. SCA occurs when the heart suddenly and unexpectedly stops beating. This cuts off blood flow to the brain and other vital organs. SCA is fatal if not treated immediately.
- "Youth" covered under Lindsay's Law are all athletes 19 years of age or younger that wish to practice for or compete in athletic activities organized by a school or youth sports organization.
- Lindsay's Law applies to all public and private schools and all youth sports organizations for athletes aged 19 years or younger whether or not they pay a fee to participate or are sponsored by a business or nonprofit. This includes:
  - 1) All athletic activities including interscholastic athletics, any athletic contest or competition sponsored by or associated with a school
  - 2) All cheerleading, club sports and school affiliated organizations including noncompetitive cheerleading
  - 3) All practices, interschool practices and scrimmages
- Any of these things may cause SCA:
  - 1) Structural heart disease. This may or may not be present from birth
  - 2) Electrical heart disease. This is a problem with the heart's electrical system that controls the heartbeat
  - 3) Situational causes. These may be people with completely normal hearts who are either are hit in the chest or develop a heart infection
- Warning signs in your family that you or your youth athlete may be at high risk of SCA:
  - A blood relative who suddenly and unexpectedly dies before age 50
  - o Any of the following conditions: cardiomyopathy, long QT syndrome, Marfan syndrome, or other rhythm problems of the heart
- Warning signs of SCA. If any of these things happen with exercise, see your health care professional:
  - Chest pain/discomfort
  - Unexplained fainting/near fainting or dizziness
  - Unexplained tiredness, shortness of breath or difficulty breathing
  - Unusually fast or racing heart beats
- The youth athlete who faints or passes out before, during, or after an athletic activity MUST be removed from the activity. Before returning to the activity, the youth athlete must be seen by a health care professional and cleared in writing.
- If the youth athlete's biological parent, sibling or child has had a SCA, then the youth athlete must be removed from activity. Before returning to the activity, the youth athlete must be seen by a health care professional and cleared in writing.
- Any young athlete with any of these warning signs cannot participate in practices, interschool practices, scrimmages or competition until cleared by a health care professional.





- Other reasons to be seen by a healthcare professional would be a heart murmur, high blood pressure, or prior heart evaluation by a physician.
- Lindsay's Law lists the health care professionals who may evaluate and clear youth athletes. They are a physician (MD or DO), a certified nurse practitioner, a clinical nurse specialist or certified nurse midwife. For school athletes, a physician's assistant or licensed athletic trainer may also clear a student. That person may refer the youth and family to another health care provider for further evaluation. Clearance must be provided in writing to the school or sports official before the athlete can return to the activity.
- Despite everyone's best efforts, sometimes a young athlete will experience SCA. If you have had CPR training, you may
  know the term "Chain of Survival." The Chain of Survival helps anyone survive SCA.
- Using an Automated External Defibrillator (AED) can save the life of a child with SCA. Depending on where a young athlete
  is during an activity, there may or may not be an AED close by. Many, but not all, schools have AEDs. The AEDs may be near
  the athletic facilities, or they may be close to the school office. Look around at a sporting event to see if you see one. If you
  are involved in community sports, look around to see if there is an AED nearby.
- If you witness a person experiencing a SCA: First, remain calm. Follow the links in the Chain of Survival:
  - Link 1: Early recognition
    - Assess child for responsiveness. Does the child answer if you call his/her name?
    - If no, then attempt to assess pulse. If no pulse is felt or if you are unsure, call for help "someone dial 911"
  - Link 2: Early CPR
    - Begin CPR immediately
  - Link 3: Early defibrillation (which is the use of an AED)
    - If an AED is available, send someone to get it immediately. Turn it on, attach it to the child and follow the instructions
    - If an AED is not available, continue CPR until EMS arrives
  - Link 4: Early advanced life support and cardiovascular care
    - Continue CPR until EMS arrives
- Lindsay's Law requires both the youth athlete and parent/guardian to acknowledge receipt of information about Sudden Cardiac Arrest by signing a form.

# Sudden Cardiac Arrest and Lindsay's Law Parent/Athlete Signature Form



What is Lindsay's Law? Lindsay's Law is about Sudden Cardiac Arrest (SCA) in youth athletes. It covers all athletes 19 years or younger who practice for or compete in athletic activities. Activities may be organized by a school or youth sports organization.

#### Which youth athletic activities are included in Lindsay's law?

- Athletics at all schools in Ohio (public and non-public)
- Any athletic contest or competition sponsored by or associated with a school
- All interscholastic athletics, including all practices, interschool practices and scrimmages
- All youth sports organizations
- All cheerleading and club sports, including noncompetitive cheerleading

What is SCA? SCA is when the heart stops beating suddenly and unexpectedly. This cuts off blood flow to the brain and other vital organs. People with SCA will die if not treated immediately. SCA can be caused by 1) a structural issue with the heart, OR 2) an heart electrical problem which controls the heartbeat, OR 3) a situation such as a person who is hit in the chest or a gets a heart infection.

What is a warning sign for SCA? If a family member died suddenly before age 50, or a family member has cardiomyopathy, long QT syndrome, Marfan syndrome or other rhythm problems of the heart.

What symptoms are a warning sign of SCA? A young athlete may have these things with exercise:

- Chest pain/discomfort
- Unexplained fainting/near fainting or dizziness
- Unexplained tiredness, shortness of breath or difficulty breathing
- Unusually fast or racing heart beats

What happens if an athlete experiences syncope or fainting before, during or after a practice, scrimmage, or competitive play? The coach MUST remove the youth athlete from activity immediately. The youth athlete MUST be seen and cleared by a health care provider before returning to activity. This written clearance must be shared with a school or sports official.

What happens if an athlete experiences any other warning signs of SCA? The youth athlete should be seen by a health care professional.

Who can evaluate and clear youth athletes? A physician (MD or DO), a certified nurse practitioner, a clinical nurse specialist, certified nurse midwife. For school athletes, a physician's assistant or licensed athletic trainer may also clear a student. That person may refer the youth to another health care provider for further evaluation.

What is needed for the youth athlete to return to the activity? There must be clearance from the health care provider in writing. This must be given to the coach and school or sports official before return to activity.

All youth athletes and their parents/guardians must review information about Sudden Cardiac Arrest, then sign and return this form.

Parent/Guardian Signature	Student Signature
Parent/Guardian Name (Print)	Student Name (Print)
Date	Date





# Ohio Department of Health Concussion Information Sheet For Youth Sports Organizations

Dear Parent/Guardian and Athletes,

This information sheet is provided to assist you and your child in recognizing the signs and symptoms of a concussion. Every athlete is different and responds to a brain injury differently, so seek medical attention if you suspect your child has a concussion. Once a concussion occurs, it is very important your athlete return to normal activities slowly, so he/she does not do more damage to his/her brain.

#### What is a Concussion?

A concussion is an injury to the brain that may be caused by a blow, bump, or jolt to the head. Concussions may also happen after a fall or hit that jars the brain. A blow elsewhere on the body can cause a concussion even if an athlete does not hit his/her head directly. Concussions can range from mild to severe, and athletes can get a concussion even if they are wearing a helmet.

#### Signs and Symptoms of a Concussion

Athletes do not have to be "knocked out" to have a concussion. In fact, less than 1 out of 10 concussions result in loss of consciousness. Concussion symptoms can develop right away or up to 48 hours after the injury. Ignoring any signs or symptoms of a concussion puts your child's health at risk!

#### Signs Observed by Parents of Guardians

- Appears dazed or stunned.
- Is confused about assignment or position.
- Forgets plays.
- Is unsure of game, score or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows behavior or personality changes (irritability, sadness, nervousness, feeling more emotional).
- Can't recall events before or after hit or fall.

#### Symptoms Reported by Athlete

- Any headache or "pressure" in head. (How badly it hurts does not matter.)
- 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.
- Does not "feel right."
- Trouble falling asleep.
- Sleeping more or less than usual.

#### **Be Honest**

Encourage your athlete to be honest with you, his/her coach and your health care provider about his/her symptoms. Many young athletes get caught up in the moment and/or feel pressured to return to sports before they are ready. It is better to miss one game than the entire season... or risk permanent damage!

#### Seek Medical Attention Right Away

Seeking medical attention is an important first step if you suspect or are told your child has a concussion. A qualified health care professional will be able to determine how serious the concussion is and when it is safe for your child to return to sports and other daily activities.

- No athlete should return to activity on the same day he/she gets a concussion.
- Athletes should <u>NEVER</u> return to practices/games if they still have ANY symptoms.
- Parents and coaches should never pressure any athlete to return to play.

#### The Dangers of Returning Too Soon

Returning to play too early may cause Second Impact Syndrome (SIS) or Post-Concussion Syndrome (PCS). SIS occurs when a second blow to the head happens before an athlete has completely recovered from a concussion. This second impact causes the brain to swell, possibly resulting in brain damage, paralysis, and even death. PCS can occur after a second impact. PCS can result in permanent, long-term concussion symptoms. The risk of SIS and PCS is the reason why no athlete should be allowed to participate in any physical activity before they are cleared by a qualified health care professional.

#### Recovery

A concussion can affect school, work, and sports. Along with coaches and teachers, the school nurse, athletic trainer, employer, and other school administrators should be aware of the athlete's injury and their roles in helping the child recover.

During the recovery time after a concussion, physical and mental rest are required. A concussion upsets the way the brain normally works and causes it to work longer and harder to complete even simple tasks. Activities that require concentration and focus may make symptoms worse and cause the brain to heal slower. Studies show that children's brains take several weeks to heal following a concussion.



www.healthyohioprogram.org/concussion

#### **Returning to Daily Activities**

- Be sure your child gets plenty of rest and enough sleep at night – no late nights. Keep the same bedtime weekdays and weekends.
- 2. Encourage daytime naps or rest breaks when your child feels tired or worn-out.
- Limit your child's activities that require a lot of thinking or concentration (including social activities, homework, video games, texting, computer, driving, job-related activities, movies, parties). These activities can slow the brain's recovery.
- 4. Limit your child's physical activity, especially those activities where another injury or blow to the head may occur.
- Have your qualified health care professional check your child's symptoms at different times to help guide recovery.

#### **Returning to School**

- Your athlete may need to initially return to school on a limited basis, for example for only half-days, at first. This should be done under the supervision of a qualified health care professional.
- Inform teacher(s), school counselor or administrator(s) about the injury and symptoms. School personnel should be instructed to watch for:
  - a. Increased problems paying attention.

*b.* Increased problems remembering or learning new information.

*c.* Longer time needed to complete tasks or assignments.

*d.* Greater irritability and decreased ability to cope with stress.

e. Symptoms worsen (headache, tiredness) when doing schoolwork.

- 3. Be sure your child takes multiple breaks during study time and watch for worsening of symptoms.
- If your child is still having concussion symptoms, he/ she may need extra help with school-related activities. As the symptoms decrease during recovery, the extra help or supports can be removed gradually.

#### Resources

ODH Violence and Injury Prevention Program www.healthyohioprogram.org/vipp/injury.aspx

Centers for Disease Control and Prevention www.cdc.gov/Concussion

National Federation of State High School Associations <u>www.nfhs.org</u>

Brain Injury Association of America <u>www.biausa.org/</u>

#### **Returning to Play**

- Returning to play is specific for each person, depending on the sport. <u>Starting 4/26/13, Ohio law requires written</u> <u>permission from a health care provider before an athlete can</u> <u>return to play</u>. Follow instructions and guidance provided by a health care professional. It is important that you, your child and your child's coach follow these instructions carefully.
- 2. Your child should NEVER return to play if he/she still has ANY symptoms. (Be sure that your child does not have any symptoms at rest and while doing any physical activity and/or activities that require a lot of thinking or concentration).
- 3. Be sure that the athletic trainer, coach and physical education teacher are aware of your child's injury and symptoms.
- 4. Your athlete should complete a step-by-step exercise -based progression, under the direction of a qualified healthcare professional.
- 5. A sample activity progression is listed below. Generally, each step should take no less than 24 hours so that your child's full recovery would take about one week once they have no symptoms at rest and with moderate exercise.\*

#### Sample Activity Progression\*

**Step 1**: Low levels of non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: walking, light jogging, and easy stationary biking for 20-30 minutes).

Step 2: Moderate, non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: moderate jogging, brief sprint running, moderate stationary biking, light calisthenics, and sportspecific drills without contact or collisions for 30-45 minutes).

**Step 3**: Heavy, non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: extensive sprint running, high intensity stationary biking, resistance exercise with machines and free weights, more intense non-contact sports specific drills, agility training and jumping drills for 45-60 minutes).

Step 4: Full contact in controlled practice or scrimmage.

Step 5: Full contact in game play.

\*If any symptoms occur, the athlete should drop back to the previous step and try to progress again after a 24 hour rest period.



Ohio Department of Health Violence and Injury Prevention Program 246 North High Street, 8th Floor Columbus, OH 43215 (614) 466-2144

www.healthyohioprogram.org/concussion

# **CLOVERLEAF SOCCER ASSOCIATION**

## PARENTAL CODE OF CONDUCT

"To create a fun and safe environment to enjoy soccer, with each participant developing their skills and wanting to continue to play!"

As a parent or guardian of a child involved with the Cloverleaf Soccer Association, I agree to:

### **ALWAYS:**

- Support each and every child.
- Remember that the children are playing for their enjoyment, and not mine.
- Inform the coach of any physical disability or ailment that may affect the safety of my child or others.
- Learn the rules of the game and support the policies of the league.
- Applaud good plays by ALL players.
- Be a positive role model.
- Encourage my child that honest effort is as important as victory.
- Treat my child, other children, coaches, officials, and spectators with respect regardless of race, creed, color, sex, or ability.
- Observe the game from the opposite side of the field from the team.

## **NEVER:**

- Force my child to participate in soccer.
- Engage in any kind of unsportsmanlike conduct with ANY child, coach, official, or other spectators.
- Use inappropriate, threatening, or profane language.
- Refuse to allow my child to shake hands with the opponent.
- Address a concern with a coach or official in the presence of any other players, parents, or spectators that may be taken as disrespectful, inappropriate, and/or confrontational.

\*For further information on the rules of the Cloverleaf Soccer Association please refer to OYSAN.org (Ohio Youth Soccer Association North) and/or contact a Cloverleaf Soccer Association trustee at info@cloverleafsoccer.com.\*

I have read and understand the parental code of conduct. I support it as a parent/guardian of a child involved in the Cloverleaf Soccer Association (CSA). By signing the parental code of conduct, I understand that failing to adhere to it may result in my removal from the CSA by the CSA trustees. I agree to direct any concerns with any child, coach, official, other parent, or spectator in private and in a respectful, appropriate, and non-confrontation way. I agree to address any unresolved concerns with the CSA trustees.

Parent/Guardian #1	Parent/Guardian #2
Printed name:	Printed name:
Signature:	Signature:
Date:	Date: