



2017 CINCY CHALLENGE

Presented by Warren County Soccer Academy

www.cincychallenge.com ~ www.warrencountysa.com

P.O. Box 1105, Mason, OH 45040

Participant Waiver / Release of Liability Agreement

This form *must be completed* and uploaded into Got Soccer, or your team will not play. A parent or guardian must sign this for each rostered and guest player. ***Please list rostered players alphabetically by last name, with guest players at the end (maximum of 3 guest players at 7 v 7 and 4 guest players at 9 v 9 and 11 v 11). Maximum roster sizes (including guest players) are 14 players for 7 v 7, 16 players for 9 v 9 and 18 players for 11 v 11.***

I, the undersigned, being parent and/or legal guardian of the child listed to the left of my signature, understand the risks involved and hereby consent for my child to participate in any and all activities associated with the Cincy Challenge Soccer Tournament, or use any and all facilities designated for use by Warren County Soccer Club, Inc., including those of the City of Lebanon, Ohio.

I hereby release, indemnify and hold harmless the Cincy Challenge Committee Members, Warren County Soccer Club, Inc., the City of Lebanon, Ohio, Ohio, any Park District, Field Owner and/or Operator hosting games for the Cincy Challenge, and any of the aforementioned organizations' Commissioners, Agents, Corporate Sponsors, Employees, Volunteers, and Assignees from any and all liability, claims, actions, demands, and judgments arising out of any injury or loss sustained by the below referenced child or myself or family in connection with the Cincy Challenge and activities at any participating facility. Further, I realize that it is my responsibility to understand the Rules of the Tournament, in particular the rule pertaining to conduct and the rule stating "**no pets allowed at any tournament sites**" as listed at www.cincychallenge.com.

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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 • Un-usually 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.**

Required Information Handout - <https://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/chss/Lindsays-Law/Parent-Guardian.pdf?la=en>

Required Video - <https://www.youtube.com/watch?v=s-YfCWQPegw&feature=youtu.be>

****ALL ROSTERED PLAYERS , GUEST PLAYERS AND PARENTS MUST SIGN THIS FORM ACKNOWLEDGING THEY HAVE REVIEWED THE LINDSEY'S LAW INFORMATION.**

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Concussion Parent Acknowledgement Form

For US Club carded teams and out of state/country teams only

Team Name _____

Gender _____ Age _____

This is to certify that every parent on my team has been given the Youth Sports Organization Concussion Information Sheet by the method checked below:

_____ The Youth Sports Concussion Sheet was e-mailed as an attachment to every member of my team.

_____ The Youth Sports Concussion Sheet was printed out and physically handed to every member of my team.

Signed by Coach/Team Manager

Printed name of Coach/Team Mgr.

Date

The Youth Sports Concussion Information Sheet can be downloaded or printed here:

<https://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/health/child-injury/Youth-Concussion/Attachment-5-ODH-Concussion-Information-SheetFor-Youth-Sports-Organizations.pdf?la=en>