**SENIOR BOYS SOCCER**

**CAUTIONARY STATEMENT**

Soccer is a highly competitive, fast-action game in which physical conditioning plays a major role. Because of the speed and agility with which the game is played, squad members, their families, and the coaching staff must accept and share certain responsibilities designed to enhance the safety and enjoyment of the sport.

**PREPARATION FOR PRACTICE OR CONTEST:**

1. Wear all protective equipment, pads, braces and supportive undergarments including shin guards, to every practice or contest unless otherwise indicated by the daily practice plan.
2. Wear outer and undergarments that are appropriate for humidity and temperature.
3. Players should ingest the equivalent of 4-6 glasses of water each day.
4. Players with visual impairment(s) must wear corrective shatterproof glasses or contact lenses if the impairment affects judgment or perception.
5. Players needing protective tape, padding, or bracing should arrive early to receive necessary treatment.
6. Remove all jewelry and metal hair fasteners.
7. Players with seizures, neuromuscular, renal, cardiac, insulin/diabetic, or chronic skeletal problems, disorders or diseases, must present physician’s approval to the coach prior to participation in any practice session.
8. Goalkeeper must wear proper pads (mouth guard is suggested).
9. Field players may also choose to wear a mouth guard.
10. No horseplay, rough-housing, hazing or initiations.

**IN THE LOCKER ROOM:**

1. Be alert to slippery floors
2. Be alert to changes in floor texture and to elevated thresholds between shower and locker rooms
3. Keep floors free of litter. Place all personal belongings in assigned lockers
4. Close and lock locker doors when away from your assigned locker.
5. Refrain from rapid movements, horseplay, and rough house in the locker/shower areas
6. Do not wear soccer shoes in the building or locker room at any time
7. Remove mud outside and away from the building
8. No horseplay, rough-housing, hazing or initiations.

**APPROACH TO THE PRACTICE OR CONTEST SITE:**

1. Be alert to ramps stairs, and changes in the texture and levels of concrete, fields, and sidewalks
2. Be alert to the location of the goal mouth, goal posts, and shooting drills
3. Be alert to fast action dribbling or passing drills
4. If ill or dizzy, notify the coach. Do not practice
5. Do not hang on goal posts at any time
6. Soccer is played and practiced in all types of weather. Players should have proper clothing and footwear
7. If lightning is in the area, the practice or game will be suspended until the storm passes (15 minutes without lightning)

**CAUTIONS SPECIFIC TO SOCCER:**

1. Play the ball when on defense. DO NOT attack the offensive opponent with illegal contact
2. When involved in shooting drills, shoot in specified sequences and in designated areas and directions. Be sure the goalkeeper is ready for all shots.
3. High hicks are prohibited
4. Intentional pushing and tripping is prohibited
5. Charging or contacting the goalkeeper is prohibited
6. Players must brace the neck and keep the mouth closed while striking the ball with the upper portion of the forehead when heading the ball
7. Out of control runs, jumps, or high hicks are prohibited
8. Slide tackles must be approved by a coach
9. Shin pads must be worn by all players
10. Water will be available at practices and contests

**EMERGENCIES:**

Because of the nature of soccer, some injuries will occur. All injuries must be called to a coach’s or trainer’s attention. Most will be minor and can be managed with basic first aid. However, some may need more intense management and may also require squad members to:

1. Stop all practices, scrimmages or drills. DO NOT move the victim!
2. Call the coach to manage the situation if not already at the site.
3. Sit or kneel in close proximity. Assist by:
   1. Helping with the injured person
   2. Calling for additional assistance
   3. Bringing first aid equipment or supplies to the site
   4. Directing the rescue squad to the accident site
   5. Keeping onlookers back
4. Fire or Fire Alarm:
   1. Evacuate or remain outside the building
   2. Move and remain 150 feet away from the building
   3. Be prepared to use the procedures described in #3 above.

**PARENT ACKNOWLEDGEMENT**

I will supply suitable equipment and clothing for my child’s participation in all activities associated with these field trips. I am aware that I should contact the school for further information if I am unaware what clothing and equipment is required for the activities or possible weather conditions of this field trip. My child and I understand that it is our responsibility to ensure my child has all necessary equipment and clothing.

My child and I have read over and understand information set out in this statement.

My child and I understand that the school’s Code of Conduct applies during this field trip. I will be responsible for any costs caused by my child’s failure to abide by the Code of Conduct, including any costs to send my child home.

Accidents can be the result of the nature of the activity and can occur with or without any fault on either part of the student, or the School Board or its employees or agents, or the facility where the activity is taking place. By allowing my son to participate in this activity, I am accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for my child.

In signing this consent and Waiver, I am not relying on any oral or written representation or statements made by the Board of Education and its servants, agents, employees, or authorized volunteers, or the Ministry of Education, to induce me to permit my child to take the trip, other than those set out in this Consent and Waiver.

I am 19 years of age or more and have read and understand the terms of this Consent and Waiver and understand that it is binding upon me, my heirs, executors and administrators. executors and administrators.

I give \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of student) permission to participate in the field trips set out above. I understand that my child may be exposed to certain risks while participating in this activity. Accidents and injuries may occur.

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| Date: |  |
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| Signature of Witness | Signature of Parent/Guardian |
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| Printed Name of Witness | Printed Name of Parent/Guardian |
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| Address | Address |
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| Signature of Witness | Signature of Parent/Guardian |
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| Printed Name of Witness | Printed Name of Parent/Guardian |
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| Address | Address |

**NOTE: This Consent Form must be signed by a custodial parent or legal guardian of a child who is under the age of 19 years.**