



## Idaho Jr. Steelheads

Player/Parent Agreement  
2025-2026 Season

### 2025-2026 Player and Parent Agreement

Please read and initial each box to indicate consent to the

**Overview:** This document is meant to help outline and set the expectations for all members who choose to commit to playing for the Jr. Steelheads (BYAHA) organization. Playing competitive hockey at youth level is a great opportunity to achieve personal goals, team goals, and have fun. We must also remember that in order for the program to be successful, there are specific requirements that must be followed. These requirements exist to maintain the integrity of our program, teams and to ensure we have a successful season.

**FINANCIAL OBLIGATIONS:** Each player will have two accounts- a BYAHA ACCOUNT, which pays for all ice time, and a TEAM ACCOUNT, that pays for all tournaments and team fees. Any fundraising monies earned will go to your BYAHA account. For further questions on the accounts, please reach out to the Jr. Steelheads Treasurer or your team treasurer

\_\_\_\_\_ **FINANCIAL AGREEMENT:** By completing this registration, as the parent/legal guardian of the above named child, I agree to pay the Jr. Steelheads BYAHA and team fees associated with my child's respective hockey program for the 2025-2026 season.

\_\_\_\_\_ **BYAHA ACCOUNT:** By completing this registration, as the parent/legal guardian of the above named child on a U10-U18 Jr. Steelheads team, I agree to pay the amount of \$500 by August 31st as invoiced and the second installment prior to November 1st (amount to be determined based off of practice time determined by coach). I agree to pay any additional amounts required based on scheduled and used ice time. \*Girls U16/HS team BYAHA account amounts to be determined.

\_\_\_\_\_ **TEAM ACCOUNT:** By completing this registration, as the parent/legal guardian of the above named child, I agree that I am responsible for paying my child's share of any team fees including, but not limited to, tournament entry fee costs (regardless of player will be attending/playing), travel costs, team events, and end of season activities. Team fees are paid directly to the player's team account which is managed by the player's Team Treasurer. Initial fees due will be determined by your Team Manager/Treasurer.

\_\_\_\_\_ **PAST DUE BALANCES:** By completing this registration, as the parent/legal guardian of the above named child, I agree that if my child's BYAHA fee and/or team fee accounts are past due, he/she will not be allowed to attend practices or play in any team game/events (including travel) until the accounts are made current. If a payment transaction is declined due to insufficient funds, a service fee may be charged.

\_\_\_\_\_ **REFUNDS:** By completing this registration, as parent/legal guardian of the above named child, I understand that BYAHA has a NO REFUND policy. Any exception to this policy requires the submission of a written request to the BYAHA board. Refund requests will be evaluated on a case-by-case basis and will be considered for a partial club fee refund.



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### PLAYER ATTENDANCE POLICY

\_\_\_\_\_ **COMMITMENT TO THE TEAM:** By completing this registration, as the parent/legal guardian of the above named child, I agree to have my player present at all practices. Consistent attendance is crucial for both individual development and team cohesion.

\_\_\_\_\_ **NOTICE OF ABSENCE:** By completing this registration, as the parent/legal guardian of the above named child on a U10-U18 Jr. Steelheads team. I agree to notify the coach at least 24 hours in advance if my player is unable to attend practice; except in the cases of emergency or illness.

\_\_\_\_\_ **PUNCTUALITY:** By completing this registration, as the parent/legal guardian of the above named child, I agree that my athlete is expected to arrive on time and be prepared for the start of practice. Consistent lateness may also result in consequences similar to unexcused absences.

\_\_\_\_\_ **EXCUSED ABSENCES:** By completing this registration, as the parent/legal guardian of the above named child, I agree that excused absences may include illness, family emergencies, academic commitments, and previously scheduled medical appointments. Absences for other reasons must be discussed with and approved by the coach in advance.

\_\_\_\_\_ **UNEXCUSED ABSENCES:** By completing this registration, as the parent/legal guardian of the above named child, I agree that unexcused absences may result in reduced playing time or other consequences as deemed appropriate by the coaching staff. I also agree that repeated unexcused absences can affect an athlete's standing on the team.

### PLAYER AND PARENT BEHAVIOR

\_\_\_\_\_ **CODE OF CONDUCT:** By completing this registration, as the parent/legal guardian of the above named child, I agree to follow and abide by applicable USA Hockey, IAHA and BYAHA rules and regulations. BYAHA has a zero tolerance of abuse for all club representatives, members and participants. Abuse includes, but is not limited to: verbal, physical, mental, sexual, and all forms of neglect. All violations of this code of conduct will be subject to investigation by BYAHA and ultimately may result in suspension or dismissal of the offending member; parent and/or player.

\_\_\_\_\_ **SAFE SPORT TRAINING:** If you plan to volunteer, coach or are a player born prior to 2008 MUST complete SAFE SPORT certification prior to being allowed to attend or participate in any/all BYAHA organized events, games or training. Volunteers that plan to work on ice, supervise locker rooms, or work in the penalty box must complete a background check (good for two years) in addition to the Safe Sport certification.



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\_\_\_\_\_ **CONCUSSION INFORMATION:** I, as the parent/legal guardian of the above named child, hereby acknowledge the receipt of the concussion information provided as an appendix to this agreement (Information provided below).

\_\_\_\_\_ **Conduct, Culture & Organizational Integrity Claus:**

Participation in the Junior Steelheads program is a privilege contingent upon behavior that supports the integrity, direction, and culture of the organization. Any conduct—by a player or parent—that is deemed detrimental to the reputation, unity, or operations of the program may result in disciplinary action, including but not limited to suspension, release, or permanent removal, without refund.

This includes any actions, communications, or behavior—public or private—that disrupt team cohesion, undermine coaches or staff, or negatively impact the experience of other participants. The organization reserves the sole right to determine what constitutes conduct detrimental to the program and to act in the best interest of protecting its mission, values, and participants.

The Junior Steelheads maintain a zero-tolerance policy for internal or external behavior that damages the program's credibility, culture, or ability to function as a high-performance environment. Individuals found in violation may be asked to leave immediately and forfeit future participation opportunities.

I have read the above paragraphs and fully understand the terms contained herein. I understand that I am agreeing to assume certain responsibilities and commitments to release BYAHA from certain possible future liabilities. I understand that I will give electronic agreement and consent to the above paragraphs. By typing your name below you are consenting to submit this as your legal signature and agreement.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date Signed



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### Social Media Release

I hereby authorize Jr. Steelheads to use my photo related to my experiences with the Jr. Steelheads. I understand this information may be used in publications, including electronic publications, audiovisual presentations, promotional literature, advertising, community presentations.

### LEVEL OF CONSENT

- ☐ I give my consent  
☐ I deny consent

I understand that I can revoke this release any time in writing to the Jr. Steelheads Board of Directors.

Player Name: \_\_\_\_\_

Team: \_\_\_\_\_

Player Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The signature of a parent or legal guardian is required if the above individual is under the age of 18*



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### **CONCUSSION IDENTIFICATION FOR PARENTS**

WHAT IS A CONCUSSION? A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. You can’t see a 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 your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION? If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

#### **SYMPTOMS REPORTED BY ATHLETE:**

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems • Confusion
- Just not “feeling right” or is “feeling down”

#### **SIGNS OBSERVED BY PARENTS/ GUARDIANS:**

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes

DANGER SIGNS - Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures



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- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

### **WHAT SHOULD YOU DO IF YOU THINK YOUR CHILD HAS A CONCUSSION?**

**SEEK MEDICAL ATTENTION RIGHT AWAY** - A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

**KEEP YOUR CHILD OUT OF PLAY** - Concussions take time to heal. Don't let your child return to play the day of the injury and until a health care professional says it's OK. Children who return to play too soon - while the brain is still healing - risk a greater chance of having a second concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

**TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS CONCUSSION** - Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

### **HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION OR OTHER SERIOUS BRAIN INJURY?**

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
- However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

**HOW CAN I HELP MY CHILD RETURN TO SCHOOL SAFELY AFTER A CONCUSSION?** Children and teens who return to school after a concussion may need to:

- Take rest breaks as needed
- Spend fewer hours at school
- Be given more time to take tests or complete assignments
- Receive help with schoolwork
- Reduce time spent reading, writing, or on the computer Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. As your child's symptoms decrease, the extra help or support can be removed gradually.