



“Play Up” Waiver Request Form

The Kleinburg Nobleton Soccer Club allows parents/players to request a WAIVER to allow their player to “play up” into the next age level available to them. Requests and any approval granted are for one playing season only. Requests are by written application only by the parent or legal guardian. While the KNSC does not recommend that players play up, our leadership does recognize that there may be a number of factors, including but not limited to, size, maturity, playing experience and exceptional skills that may warrant a child’s ability to play up.

Player Name:	
Player DOB:	Current Age Group: Requested Age Group:
Parent Name	
Parent Phone No.:	Parent Email:

I, the parent/guardian of the above-minor child, hereby request my child to play in an age level older than that assigned and recommended by KNSC. I am aware that my child will be playing against older and potentially more physically developed players with potentially higher level of skills, and I, therefore, recognize the added risks to my child’s health and safety, as well as to my child’s emotional well-being. In signing below, I accept these risks and accept all and every liability and responsibility stemming from such risks as my own, and I absolve KNSC, its board members, volunteers, and associated personnel against any claims by or on behalf of the player named above and from any responsibility for the same. I also acknowledge that I am making this decision on my own initiative and have not been requested to do so by any KNSC coach or member.

INFORMED CONSENT/INSURANCE NOTICE – KNSC RECOMMENDS THAT PLAYERS NOT REGISTER TO A TEAM THAT IS NOT IN THE AGE APPROPRIATE LEVEL OF SAID PLAYER. KNSC RECOMMENDS ADHERING TO THE AGE RECOMMENDATIONS IN ITS RULES AND REGULATIONS.

It is KNSC’s policy that all players compete at an age level they are capable of, both physically and developmentally. For a player to move up to the next age level available to them requires approval from the KNSC Technical Director and/or General Manager.

Parent/Guardian – Print Name

Requested KNSC Team / League

Parent Signature

Approving Coach

Date

Approval Date