FORM NT

ILLINOIS YOUTH SOCCER ASSOCIATION ("IYSA")
2024 NON-IYSA/US YOUTH SOCCER & FOREIGN TEAM AGREEMENT

The Team must complete and submit this form to the Tournament Host at the Tournament registration!

(The Tournament Host will submit this completed form and all attachments to Illinois Youth Soccer (IYSA) office with Post Tournament Report.)

Check One: ☐ NON-IYSA/US YOUTH SOCCER TEAM ☐ FOREIGN TEAM **Do not complete this form for an IYSA/US Youth Soccer Team**

IYSA Sanctioned Tournament ("Tournament")_____ Tournament Date(s)_____

Tournament Host _____

Tournament Location_____

The Team_____ Age U-_____ Check One: ☐ Boys or ☐ Girls

The Team's Head Coach_____ Cell Phone(_____)_____

Coach's Street Address_____ Email_____

City, State, Zip_____

US Soccer Affiliation/Foreign Soccer Federation Affiliation_____

I, the undersigned Team Coach, Manager, and/or Authorized Representative of The Team certify I that am authorized to conduct business on behalf of The Team listed herein.

1. If The Team is not an IYSA/USYSA/USSF Member Organization team, I agree to submit to the Tournament Host at registration or prior to the start of the Tournament a current certificate of liability insurance effective for the tournament dates naming the Illinois Youth Soccer Association (hereinafter known as IYSA) and the Tournament Host as additional insured in the minimum amount of $2 Million.
2. I agree to submit to the Tournament Host at registration or prior to the start of the Tournament proof that The Team, including its players and coaches, has permission and insurance from the US Soccer affiliate to participate in the Tournament.
3. I understand and agree that The Team, its members and related individuals are NOT covered by IYSA insurance tor any and all claims and incidences arising out of The Team's participation in the Tournament including but not limited to communicable diseases.
4. For each of The Team's players, coaches and The Team's personnel, I agree to submit to the Tournament Host at registration or prior to the start of the Tournament a completed, signed by the adult participant or the parent/guardian for a minor the current, unaltered IYSA Emergency Medical Release & Liability Waiver.
5. I certify that for all of The Team's players and coaches have a current valid player pass from The Team's US Soccer Member Organization or foreign soccer Federation/National Association. I understand that I have to present these passes to the Tournament Host at registration. The coach's pass must include the coach's name and photo. The player's pass must include the player's name, photo and date of birth.
6. I certify that The Team's coaches/managers/trainers, etc. (adults that have regular contact with or authority over and/or have access to the data of youth participants) have successfully completed and passed within the current year a valid background search that complies with the criteria and search requirements of US Soccer, Illinois Youth Soccer and the National Council of Youth Sports..
7. I certify that The Team's coaches/managers/trainers, etc. (adults that have regular contact with or authority over and/or have access to the data of youth participants) have the current year US Center for SafeSport Training Certificate.
8. I certify that The Team's coaches/managers/trainers have a Concussion Training Completion Certificate from the National Alliance for Youth Sports or Heads Up Concussion in Youth Sports, the current IYSA Emergency Medical Release & Liability Waiver and Assumption of Risk Agreement.
9. I agree to submit to the Tournament Host at registration or prior to the start of the Tournament a copy of The Team's current certified, official US Soccer Member Organization's or Foreign Soccer Federation/National Association roster.
10. I agree that only the players listed on the Team's Roster may participate in the Tournament and that no roster changes will be permitted during the course of the Tournament.
11. By my signature below, I agree that I, The Team coaches, players and everyone affiliated with The Team shall abide by the rules and regulations of the IYSA sanctioned tournament.

On behalf of The Team I understand and agree to abide by all the requirements set forth in this Agreement and certify that the information provided by me is true and correct. I acknowledge and understand that the players, coaches and everyone associated with The Team are not covered by IYSA insurance for any and all injuries and claims including Covid and any other communicable disease arising of The Team's participation in this IYSA approved tournament ("Tournament") and further certify that I have insurance coverage for all of The Team's members from the US Soccer affiliated organization or Foreign Soccer Federation/National Association. I further understand that neither the IYSA nor their Affiliates are liable for transportation, lodging, or injury to persons or property sustained in the course of this approved event. On behalf of The Team I also agree to defend, indemnify and hold harmless the IYSA, its officers, directors, coaches, managers, employees, agents, associated personnel, affiliated organizations, and sponsors from and against any and all liabilities, losses, fines, penalties, costs, expenses and reasonable attorney's fees that arise out of any and all allegations asserted in any third party claim, demand, suit, or cause of action or proceeding arising out of any of the following, whether actual or alleged:(a) any bodily injury, including death, to persons or damage or loss of property which result in whole or in part from any act or omission of the IYSA and the Tournament Host relating to the IYSA and the Tournament Host carrying out its obligations under this Agreement; and (b) any breach of this Agreement.

_____	_____	_____	_____
Signature	*Print Name*	*Title*	*Date*