

Injured Player Policy

Approved by Board on April 22, 2019



Policy Statement

IMPACT Soccer Club (ISC) acknowledges that soccer is a contact sport and although precautions are taken, injuries do happen. This policy provides the necessary structure for the provision of allowing ISC to suspend an injured player's financial obligation to ISC, provided the injury was sustained at an ISC sanctioned event and that the player will be unable to participate for a minimum of 60 days. In the event that a player was injured in a non-IMPACT Soccer Club sanctioned event, the ISC Board of Directors will accept and review an appeal provided by the player's family.

Injury Policy Waiver Guidelines

The ISC Board of Directors acknowledge that ISC members/families on each team pay a significant amount of money to participate in the ISC Competitive Soccer Program. All registration fees are non-refundable and non-transferable as teams are formed based on the numbers of registered players. Processing fees paid to Sports Engine for online registration are also non-refundable and non-transferable.

- The policy only applies to injuries sustained during ISC sanctioned trainings, games or events
- In the event that the injured was sustained at a NON-IMPACT Soccer Club Sanctioned event, the player's family may appeal the ISC Board of Directors, once the 60-day period has been reached.
- Appropriate medical document submission is required to accompany the request
- The ISC player will be unable to participate for a minimum of 60 days
- Designated Injury Policy Waiver Committee Members (request must be approved by at least two of the following): ISC Director of Coach, ISC President, or the ISC Competitive Registrar

Policy

An ISC player injured at an "ISC sanctioned event" may petition two of the three Injury Waiver Committee Members for a waiver of their financial obligations starting with the third month of the players injury, if the injury results in the player being unable to train/participate in league or tournament matches for a period of time exceeding two (2) months.

"ISC sanctioned events" shall only include sanctioned team trainings, NorCal league matches (fall, winter, spring or summer), State Cup matches, and team attended tournament matches.

When petitioning for a waiver, the petitioning player MUST submit medical documentation supporting the inability of the player to participate for a period longer than two (2) months.

Any request for a waiver MUST be approved by at least two of the three designated members (DOC, President, and Competitive Registrar).

If a waiver is granted, the player shall:

1. Not be authorized to participate (play) in any club sanctioned events until they receive full written medical clearance stating they are healthy to participate (play) and
2. The player's USClub Soccer pass will be held at the ISC office while the waiver is in effect. Once the medical clearance has been received, the player pass will be returned to the team manager.
3. Starting with the third (3rd) month, will not have to pay their club dues, in accordance with the board approved payment schedule, until cleared by their medical provider.
4. Upon receiving clearance to participate (play) in club sanctioned events from their medical provider, the player (and their family) shall immediately begin paying their dues in accordance with the board approved payment schedule.
5. No months shall be prorated when implementing this policy.
6. Injuries resulting from guest playing outside of ISC are NOT covered as part of this policy (example: guest playing for/with another club)
7. A player that suffers an injury during an "ISC sanctioned event" must be in good financial standing PRIOR to receiving a waiver from their financial obligation as part of this policy.
8. All medical documentation must be specific to the injury in question and any additional documentation (Physical Therapy, Status and Follow-Up with primary medical doctor/team) must be submitted as a packet when petitioning for the Injury Policy Waiver to two of the three designated committee members (DOC, Club President, Club Competitive Registrar).

Handling of Reported Violations

The ISC Club Operations Committee shall address all reported concerns/violations and shall immediately notify the ISC Executive Committee within ten (10) business days, of reported concerns/violations. All reported concerns/violations will be promptly investigated by the ISC Executive Committee and appropriate corrective action will be recommended to the Board of Directors, if warranted by the investigation. In addition, action taken must include a conclusion and/or follow-up with the complaint for complete closure of the concerns.

1. Anyone reporting a concern, must act in good faith and have reasonable grounds for believing the information disclosed indicates an improper conformance to the policy. The act of making allegations that prove to be unsubstantiated, and that prove to have been made maliciously, recklessly, or without foreknowledge that the allegations are false, will be viewed as a serious disciplinary offense and may result in discipline, up to and including dismissal from ISC.
2. All reports of concerns/violations, and investigations pertaining thereto, shall be kept confidential to the extend possible, consistent with the need to conduct an adequate investigation. Disclosure of reports of concerns to individuals not involved in the investigation will be viewed as a serious disciplinary offense and may result in discipline, up to and including dismissal from ISC. Such conduct may also give rise to other actions, including civil lawsuits.
3. All medical documentation provided in support of a player's petition shall be kept strictly confidential.

Injured Player Financial Obligation Waiver Request Form



Player Name: _____

Player Coach: _____ Team: _____

Requestor Name: _____

Relationship to Injured Player (circle one): Coach ___ Parent ___ Player (if over 18) ___

Reason for Request / Injury Date: _____

Event Type (NorCal League game, ISC training or ISC Team-approved Tournament):

Medical Recommendation & Documentation of Time to be missed:

Medical Point of Contact (Name and phone number):

Injury Type: _____

Financial Obligation Waiver Request Approval (at least two needed):

ISC Director of Coaching (signature): _____

ISC President: _____

ISC Competitive Registrar: _____

Notes:

