

Monroe Soccer Club

"Play Up" Form

Play up is based upon the recommendation of the MSC Coaching Director. Reference Policy Book for further clarification.

Part I - To be filled out by the player's parent or legal guardian

Request Date: _____ fall _____ Spring Year _____

Player Name: _____ Player Birth Date: _____

Age Appropriate Team: _____

Player Id No. Boy/Girl _____

Home Address: _____

ACKNOWLEDGEMENT

I, _____ have been informed of the ages of the children in the U-____

Age bracket, which I am requesting my son/daughter to play. I understand that by playing up there is a possibility that other players in that age bracket may be bigger, stronger and faster than my child, therefore increasing the risk of injury.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name: _____ Relationship: _____
(please print)

Part II - To be completed by authorized coach(es) from the Monroe Soccer Club

Age-appropriate bracket: U-____ Requesting to play in bracket: U-____

Reason for request to play up (check one):

____ The age-appropriate team has a full roster

____ No age-appropriate team is in place for the current season

____ Player is already rostered on an existing team

____ Other (please specify): _____

Approvals (For initial season, thereafter review only)

Age-appropriate coach approval

"Play-up" team coach approval

Signature: _____

Signature: _____

Printed name: _____

Printed name: _____

Date: _____

Date: _____

Check the following: Practice Up Only____ Practice and Play Up____ Play Up Permanently____

MSC Coaching Director: _____ Date: _____

Signature

Print

