**NMYSA PLAYING-UP CONSENT FORM**

The UNITED STATES YOUTH SOCCER organization, the NEW MEXICO YOUTH SOCCER ASSOCIATION, and your local affiliate require permission from a parent/guardian for any soccer players to play up in an older age group than the age group governed by birth year.

*I, as a parent/guardian, am aware that my younger player will be playing against older, usually more physically developed players whose soccer skills are more advanced and whose play may be more physical. As parent/guardian, I give MY PERMISSION for*

*my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( \_\_\_\_\_\_\_ ) to play up*

***name*** ***age***

*in the older age group of \_\_\_\_\_\_\_\_\_\_\_\_ for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ soccer season.*

***age*** ***season***

*In granting my permission, I release the above-mentioned soccer organizations from all responsibility should my child be injured, no matter how seriously, while a member of the team, and will not hold the above soccer organizations liable for any injuries that might occur.*

*(Before giving your child approval to play up, please consider your child’s maturity, size, coordination, muscular development, attitude, and social development in comparison to the team members of the older team.)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Parent/guardian Approval* |  |  |  | *Date* |
|  |  |  |  |  |
| *Coach Approval* | *Team* |  | *Date* |
|  |  |  |  |  |
| *NMYSA Affiliate League Registrar* |  |  |  | *Date* |

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