



**BAYFA Elite FC
PLAYER CONTRACT
For the 2023-2024 Season**



BAYFA ELITE FC

Contract Agreement 2023/2024 Season

READ THOROUGHLY BEFORE SIGNING

Welcome to the BAYFA Elite FC soccer program for the 2023-2024 season. You will find in this packet the explanation of your annual fees and payment schedule. Also included in this document is our club policies that both the player and family will observe. Please completely and sign all areas that require Parent/Guardian and/or Player.

Dues & Fees

This covers the annual contract period for the upcoming season, beginning on July 1, 2023, and ending on June 30, 2024

Club Total yearly fees \$600.00 if paid monthly.

This fee does not include the uniforms; the uniform kit can be purchased through the online store. The starter kit is \$125.00 includes 2 game jerseys, a practice jerseys, socks, and shorts. A bag and warmups can be purchased separately.

Club Dues Payment Schedule:

1. On signing day: (July 1, 2023)
 - o \$100.00 All players; covers July 2023 and June 2024 payments (1st and last payments)
2. Monthly Payment Plan:
 - o Due on the first day of the month from Aug 01, 2023, through June 01, 2024 (10 payments of \$50)

Players will additionally be responsible for:

- Tournament Fees (beyond the 4 planned for provided we have the funds)
- Out of Town Lodging
- Camps
- Club Raffle or other fundraising (one time a year)

Team Account:

All player funds in the team account left over at the end of the fiscal soccer year will be carried over to the next season unless the team dissolves. If a team dissolves, the remaining funds will be reimbursed after all obligations are fulfilled.



Delinquent Fee Policy:

Payments are due on the 1st of each month. There will be a \$15 late fee for payments paid after the 15th. A player may be placed on suspension when fees are delinquent 2 months or more. The suspension will remain in effect until all fees are up to date. Determination of extenuating circumstances for exceptions to this policy will be at the discretion of the teams Coach and/or Club President. If suspended, the youth player is expected to continue attending all practices and scrimmages; however, the player will be unable to participate in any league or tournament games.

Purchase of Uniforms & Club, Team Items:

No team can purchase or use any uniform other than those approved by BAYFA Elite FC. Uniforms and all other items including T-shirts, warmups, banners, flags must include the BAYFA Elite FC Logo. Any violations will be subject to a fine assessed to the team and/or coach.

Note: Each individual team is a part of the BAYFA Elite FC Club. It is the Club only that has the authority to decide what uniforms or other items that the team uses. In addition, the Club has adopted a process for securing and purchasing these items. It is essential that each team understand what this process is and does not circumvent the process by securing their own vendor or items.

By signing this document, you agree to comply with the policies and payments procedures establish herein.

Parent / Guardian (Print Name) Date Emergency Phone Number

Address City / State / Zip

X _____
Parent / Guardian (Signature)



BAYFA Elite FC Parents Code of Conduct Agreement

- It is important that the parents of our team conduct themselves in a manner that represents the team, coaching staff, and the BAYFA Elite FC Club in a positive way.
- Sideline behavior is a major issue. Parents should encourage good sportsmanship and function as a good role model for your player. All parents are required to follow the rules set forth by the coaching staff and team management at all practices, games, and team functions.
- Parents shall not taunt or ridicule game officials or the opposing teams.
- Parents shall not cross the sideline at any time, including injury, unless called by the coaching staff.
- Playing time is always an issue. The coach makes all decisions regarding the amount of playtime for each player. There is no **guaranteed** playtime for any individual player. Parents are not to confront coaching staff before, during, or after games. Any issues should be addressed by setting an agreed-to time with your team's coach or manager.
- Parents shall not coach the players from the sideline. This causes confusion for the players between parent instructions and coach's instructions. The BAYFA Elite FC programs are based on hard, strong, physical, and mental play. The players need to make their own decisions on the field based on instructions from only their coach.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____



PLAYER AGREEMENT

Player: _____

Each player will be expected to:

1. Attending all practice sessions (practices, games & clinics) fully equipped (shin guards must always be worn and everyone should have their own ball and water) with an attitude to participate, learn and improve your soccer skills. If you are going to miss a practice or game, contact the Coach or Manager before the missed event.
2. Respect and support your coaches and teammates in actions and words. Obscene language and/or actions which are disrespectful to participants teammates, coaches, or other BAYFA Elite FC participants is not tolerated under any circumstance. Player behavior is expected to be exemplary on and off the field. Players will be expected to conduct themselves with dignity and respect. Disrespect for Coaches, teammates, opposing teams and referees, will not be tolerated. Poor behavior by one player is a bad reflection on their teammates and the BAYFA Elite FC.
3. Practice the skills taught at the training sessions outside of regular practice times.
4. On game day, be on the field, in proper uniform, ready to play 30 minutes prior to the scheduled start time.
5. Adhere to the rules of the game.
6. All players are expected to maintain passing grades in school.

PLAYER Signature: _____ Date: _____

PARENT Signature: _____ Date: _____



Indemnity Agreement

As Parents and or Guardians I assume full responsibility on the part of the registrant and agree to the following:

1. In exchange for participation in the BAYFA Select Tryout activity, this is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to indemnify and hold harmless BAYFA, BAYFA Elite FC, North Richland Hill Parks Department, its officers, directors, managers, trainers, coaches, agents, representatives, employees, and program board members from all liability incidents to my minor child's involvement or participation in these programs as provided above.
2. In my absence, I hereby give my consent and permission for the Player to be medically treated for all emergency injuries resulting from this activity.
3. The undersigned acknowledges and agrees to adhere to all policies and procedure related to Covid-19 health protocols.
4. I further agree to indemnify, hold harmless, and defend BAYFA, BAYFA Elite FC, North Richland Hill Parks Department, its officers, directors, managers, trainers, coaches, agents, representatives, employees, and program board members from all claims for injuries, damages or loss sustained by my participant arising out of, connected with, or in any way associated with the activities of this soccer program.

The undersigned has read this document, understands the contents and is under no duress or obligation of any kind to execute it.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____ Date: _____



PARENT/GUARDIAN CONSENT AND PLAYER MEDICAL RELEASE FORM

Player's Name: _____ Date of Birth: _____ Gender: _____

Address: _____ City: _____ State: _____ Zip: _____

EMERGENCY INFORMATION

Parent/Guardian #1 Name: _____ Home Phone: _____ Work Phone: _____

Parent/Guardian #2 Name: _____ Home Phone: _____ Work Phone: _____

In an emergency, when parents/guardians cannot be reached, please contact:

Name _____ Home Phone: _____ Work Phone: _____

Name _____ Home Phone: _____ Work Phone: _____

Allergies: _____

Other Medical Conditions: _____

PARENT/GUARDIAN CONSENT AND MEDICAL RELEASE

Recognizing the possibility of injury or illness, and in consideration for US Youth Soccer and members of US Youth Soccer accepting my son/daughter as a player in the soccer programs and activities of US Youth Soccer and its members (the "Programs"), I consent to my son/daughter participating in the Programs. Further, I hereby release, discharge, and otherwise indemnify US Youth Soccer, its member organizations and sponsors, their employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the Programs, against any claim by or on behalf of my player son/daughter as a result of my son's/daughter's participation in the Programs and/or being transported to or from the Programs. I hereby authorize the transportation of my son/daughter to or from the Programs.

I confirm that my son/daughter is physically capable of participating in the sport of soccer. I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child's participation in the Programs. I give my consent to have an athletic trainer and/or licensed medical doctor or dentist provide my son/daughter with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.

Signature of Parent/Guardian

Date



US Club Soccer Form R002
Player Information, Medical Treatment Authorization,
Liability Waiver/Release and Consent Form

To be retained by the US Club Soccer member organization for at least five (5) years or until the player's 18th birthday, whichever occurs last.

Member Organization / Club Name: _____

State: TX

Player information:

Full name: _____ Birth Date: _____ Gender: Female Male

Street address: _____ City: _____

State: _____ ZIP Code: _____ Email address (for adult player only): N/A

Allergies: _____

Other medical conditions: _____

Physician: _____ Phone #1: () _____ Phone #2: () _____

Medical/Hospital Insurance Company: _____ Phone #: () _____

Policy Holder's Name: _____ Policy Number: _____

To be completed for non-adult players:

Parent/Guardian #1 Name: _____ Phone #1: () _____ Phone #1 Type: _____

Email Address: _____ Phone #2: () _____ Phone #2 Type: _____

Parent/Guardian #2 Name: _____ Phone #1: () _____ Phone #1 Type: _____

Email Address: _____ Phone #2: () _____ Phone #2 Type: _____

In an emergency, for an adult player or when a parent/guardian cannot be reached, please contact the following:

Name: _____ Phone #1: () _____ Phone #2: () _____

Name: _____ Phone #1: () _____ Phone #2: () _____

In signing below, I hereby consent to the above-named member organization/club registering me or my child or guardian, as applicable, with US Club Soccer. I understand that a player may be registered to only one US Club Soccer member organization/club at any time.

Medical Treatment Authorization and Liability Waiver/Release: I hereby give my consent, on my own behalf or on behalf of my child or guardian, as applicable, to have an athletic trainer, coach, team manager, emergency medical technician, physician, nurse, dentist, or other healthcare professional and, in each case, their associated personnel provide the player identified above with medical assistance and/or treatment and agree to be financially responsible for the cost of such assistance and/or treatment. I understand treatment for injury will be based, at least in part, on information provided herein. I hereby authorize emergency transportation of the player, at player or parent/guardian's expense, to a healthcare facility should an individual listed above consider it to be warranted. I acknowledge and understand that certain risks of injury (including, but not limited to, concussions, other serious bodily injury or death) are inherent in playing soccer. These types of injuries may result from the player's actions, the actions or inactions of others, or a combination of both. In signing below, I certify that the player received all necessary medical clearances to participate fully in all US Club Soccer programs without restriction or condition.

To the maximum extent permitted by law, I hereby agree to release, waive, hold harmless and indemnify the member organization, the National Association of Competitive Soccer Clubs (dba US Club Soccer), its agents, contractors and sponsors, U.S. Soccer and its affiliated organizations, and the employees and associated personnel of these organizations, against any claim by or on behalf of the player named above as a result of the player's participation in US Club Soccer programs and/or being transported to or from the same, which transportation I hereby authorize.

Privacy Policy & Terms of Use: I acknowledge and agree that I have read, understand and agree to US Club Soccer's Privacy Policy & Terms of Use (collectively, the "Policy"), available at usclubsoccer.org. The Policy describes US Club Soccer practices for collecting, maintaining, protecting and disclosing player information. In signing below, you agree on your own behalf or on behalf of your child or guardian, as applicable, to the provisions of the Policy and any successor Policy then-in-effect.

AGREED AND ACCEPTED: I hereby agree and accept all terms and conditions set forth in this Player Information, Medical Treatment Authorization, Liability Waiver/Release, and Consent Form.

Signature of player (if an adult) or parent/guardian (if player is a minor)

Relation to player (if applicable)

Printed name of signer

Date

IMPORTANT NOTICE: ALL PLAYERS, PARENTS AND GUARDIANS ARE BOUND BY AND MUST COMPLY WITH ALL US CLUB SOCCER POLICIES AND RULES WHICH CAN BE FOUND ON THE US CLUB SOCCER WEBSITE [usclubsoccer.org].