



VSC Return to Play Policy Acknowledgement Form

- I acknowledge that I have read, fully understand and agree to comply with the Valley Soccer Club Return to Play Policy.
- Parents – I acknowledge that my child is voluntarily returning to club activities and I will fulfill the duties outlined in the Parent Responsibilities section of the Return to Play Policy. I also acknowledge that I will immediately notify my player's coach in the event of a positive or presumed positive COVID-19 case by the player or a member of our household.
- Coaches/Staff - I acknowledge that I am voluntarily returning to club activities and I will fulfill the duties outlined in the Coach/Staff Responsibilities section of the Return to Play Policy. I also acknowledge that I will immediately notify the Board Contact in the event myself or a member of my household has a positive or presumed positive COVID-19 case.

Role (please select one)

Parent

Coach/Staff

Name:

Signature:

Date:

PARENTS ONLY

Player's Name:

Age Group:

Team Coach:
