

VISTA MURRIETA BRONCO SOCCER



**Please read this statement carefully, sign and return to Coach Hanson August 19th, 2016.
Also, please attach a photo of yourself to the front of this form.**

I, _____ and we the parent/guardian, understand that there will be no guarantee that I, the student/athlete, will automatically be placed on one of the teams in the Vista Murrieta Men's Soccer program. I/we completely understand that if I have played within the Vista Murrieta Men's Soccer Program in the past there may be the possibility that I, the student/athlete, may not be selected to be on any of the teams for the upcoming season.

All of the evaluations and rankings will be made based on the input from **all** coaches. We will be considering fitness, aggressiveness, field awareness, ability to finish and play quickly, and passing and receiving skills. In conjunction with these soccer specific skills, we will also base decisions upon other aspects of the student athlete. These aspects will include: conduct in all school related issues including classes and other extra-curricular activities, conduct within the program and the community, effort, hustle, commitment and overall attitude and coachability. We will take a look at the program as a whole and what is best for all involved and not solely the individual. Student athletes are also required to be cleared through our Athletic Office **PRIOR** to trying out, the forms can be found at VMHS.net, Athletics Page, under forms. If, after our try-outs, you feel that you need to talk to the coach please do so by making an appointment. Due to supervision issues and time constraints we will be unable to discuss questions about your son's progress during or directly after a try-out or practice. Keep in mind that we will only discuss your son and not anyone else nor will we discuss how your son rates vs. another.

Over the past 14 years, the Vista Murrieta Men's Soccer program has become a highly competitive program. Due to the fact that we are a large school with limited opportunities, we are not able to place every child on a team who wishes to participate or has played in our program in the past. While this is not our desire, it is the reality of competitive athletics. The hardest thing a coach has to do is to tell a young person that they will not be on a team or that they will not be asked back. A main goal of a competitive program is to put the most talented athletes on a team. Note that things such as playing on a club team, playing time, starting positions or playing within our program in the past does not guarantee that you will be a player in our program. Hopefully, each student athlete has personal improvement as their main goal.

Only sign this statement if you understand and agree to adhere to all of its contents.

I understand the above letter, acknowledge the risk of injury and accordingly agree that the MVUSD shall not be held liable for such injuries, and will try my hardest to do the best I can. I also understand that not all of the candidates trying out will make the team.

Student-Athlete Name: _____ Grade: _____

Student-Athlete Signature: _____

Parent/Guardian Name: _____

Address _____ Home Telephone _____

Parent Work Phone # _____ Cell Phone # _____

TREATMENT CONSENT: _____ YES _____ NO – In the event of accident or emergency, I (we) give permission for school authorities to take my (our) child to any available doctor or hospital, or request their services. I (we) grant consent to any and all health providers to provide my (our) child with any medical care as a result of any injury or illness.

Parent signature: _____ Date: _____

THIS WAIVER IS GOOD FOR 1 WEEK ONLY FROM THE ABOVE DATE