

Lincoln Youth Soccer Club Play Up Request



I/We accept responsibility for the decision to have our child:

Player's Name _____

Date of Birth _____

"Play Up" to the _____ age division. Gender _____

Team requesting to play on, if applicable _____

I/We understand that he/she may be playing with and against other athletes that may be up to three years older than my child.

I/We understand that soccer is a physical contact sport and feel that my/our child is qualified emotionally and physically to be able to "play up" an age division.

Mother or Father's (or Legal Guardian's) Signature Date

Mother or Father (or Legal Guardian) Print Name

Phone Number: _____

E-mail: _____

***This form must be filed with the registrar every season a "play up" is requested.

At least one parent must sign the form.

A "play up" form is only needed for players wanting to move from:

U6 up to U7/U8 division

U7 or U8 up to U9/U10 division

U9 or U10 up to U11/U12 division

U11 or U12 up to U13/U14 division

U13 or U14 up to U15/U16 division

U15 or U16 up to U17/U18/U19 division