

**HOVERLA SOCCER ACADEMY, LLC**  
**PARENTAL AUTHORIZATION, CONSENT, RELEASE, AND INDEMNITY**

I, \_\_\_\_\_, am the parent or legal guardian of \_\_\_\_\_ (hereinafter “my child”). I warrant that I possess all the rights, powers, and privileges of a parent or legal guardian necessary to execute this Consent, Release, and Indemnity with binding legal effect. I consent to my child’s participation in Hoverla Soccer Academy practices, training, and activities that will be held at Immaculate Conception Catholic Schools in Warren, Michigan.

I personally assume, for myself and on my child’s behalf, the risk of any harm, injury, death or damage to person or property that may befall my child, as a sole result of the inherent risks of my child participating in Hoverla Soccer Academy practices, training, and activities.

By signing below, I acknowledge that my child is participating in Hoverla Soccer Academy practices, training, and activities and I understand and am fully aware that there are risks associated with my child’s involvement in soccer practices, training, and activities. Notwithstanding this, on behalf of my child, I hereby release, indemnify, and hold harmless Roman Kravets, Hoverla Soccer Academy, LLC, its members, officers, administrators, instructors, employees, agents, volunteers, Immaculate Conception Catholic Schools and/or their pastors, coaches, directors, officers, administrators, instructors, employees, students, volunteers, participants, guests, affiliates, successors, agents, and assigns for any and all claims, demands, damages, known or unknown, fixed or contingent, or causes of actions arising from, or otherwise related to, my child’s participation in soccer practices, training, and activities, including costs and reasonable attorney fees. I understand that this is a full and complete release and waiver of all rights I may have on behalf of my child for claims related to participating in soccer practices, training, and activities.

I have fully informed myself of the contents of this Parental Authorization, Consent, Release and Indemnity.

**I HAVE READ THIS PARENTAL AUTHORIZATION, CONSENT, RELEASE AND INDEMNITY, UNDERSTAND IT, AND AGREE TO BE BOUND BY IT.**

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Please Print Name

Dated: \_\_\_\_\_

## **WAIVER AND RELEASE OF LIABILITY**

I understand that my enrollment and attendance and/or my child's enrollment and attendance at events, practices, games and sessions related to or organized by **Hoverla Soccer Academy, LLC** ("Sport Club") are strictly voluntary. I also understand that the novel coronavirus ("COVID-19") has been shown to be highly contagious and is the subject of ongoing treatment and research. The waiver, release and other representations and covenants set forth herein are given in consideration for the Sport Club permitting me and/or my child or ward to be enrolled in and/or attend events, practices, games and sessions related to or organized by the Sport Club.

1. Acceptance of Risk; Release; Indemnification. I am fully aware that there are a number of risks associated with me and/or my child or ward entering on Sport Club property or participating in Sport Club events, practices, games and/or sessions, including without limitation: (a) I and/or my child or ward or our visitors could contract COVID-19 or other diseases such as the flu or legionnaires disease which could result in a serious medical condition requiring medical treatment in a hospital or could possibly lead to death; and (b) I and/or my child or ward or our visitors will be subject to normal risks associated with the above activities such as physical injuries or even death or loss or damage to personal property. On behalf of myself and/or my child or ward and our heirs, successors and assigns, I knowingly and freely, assume all such risks, both known and unknown, relating to my and/or my child's or ward's participation or attendance in Sport Club events, practices, games and/or sessions, and I hereby forever release, waive, relinquish, and discharge the Sport Club, along with its officers, directors, managers, officials, trustees, agents, employees, or other representatives, and their successors and assigns (collectively, the " Sport Club Representatives"), from any and all claims, demands, liabilities, rights, damages, expenses, and causes of action of whatever kind or nature, and other losses of any kind, whether known or unknown, foreseen or unforeseen, (collectively, "Damages") as a result of me and/or my child or ward being a spectator, observer, participant and/or volunteer at Sport Club events, practices, games and/or sessions.

2. Covenant Not to Sue. I further promise not to sue the Sport Club or Sport Club Representatives for Damages described above.

3. Compliance with Sport Club Policy and Re-opening Guidelines. I reviewed and am familiar with Sport Club policy and re-opening guidelines and I and my child or ward agree to comply with same.

READ CAREFULLY -- BY SIGNING THIS DOCUMENT YOU MAY GIVE UP IMPORTANT  
LEGAL RIGHTS

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

X\_\_\_\_\_

Signature of Adult (on behalf of themselves)

If enrollee/participant is under 18 years old or subject to guardianship, complete the  
following:

Print Name of Minor or Ward:\_\_\_\_\_

Date: \_\_\_\_\_

X\_\_\_\_\_

Signature of Parent or Legal Guardian

## **PHOTOGRAPH WAIVER, AUTHORIZATION AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in Hoverla Soccer Academy, LLC's training, games, related events and activities, the undersigned acknowledges, appreciates and willingly agrees that:

I do hereby give Hoverla Soccer Academy, LLC, its assigns, licensees, and legal representatives the irrevocable right to use my child's name, picture, portrait, image, video or photograph in all forms and media and in all manners, including composite, for advertising, for publication or any other lawful purposes, and I waive any right to inspect or approve the finished product, including written copy, which may be created in connection therewith.

FOR PARENTS/GUARDIANS OF PARTICIPANTS UNDER 18 AT TIME OF REGISTRATION:

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release, as provided above, of Hoverla Soccer Academy, LLC, and, for myself, my heirs, assigns, and next of kin.

\_\_\_\_\_  
Childs printed name

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Printed Name

Dated: \_\_\_\_\_

\_\_\_\_\_ No, I do not agree. Do not use my child's name, picture, portrait, image, video or photograph in any forms or media.

# CONCUSSION Information Sheet



This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

## What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

## How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
  - Work with their coach to teach ways to lower the chances of getting a concussion.
  - Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
  - Ensure that they follow their coach's rules for safety and the rules of the sport.
  - Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.



**Plan ahead.** What do you want your child or teen to know about concussion?

## How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

### Signs Observed by Parents or Coaches

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (*even briefly*).
- Shows mood, behavior, or personality changes.
- Can't recall events *prior to* or *after* a hit or fall.

### Symptoms Reported by Children and Teens

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

**Talk with your children and teens about concussion.** Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that *it's better to miss one game than the whole season.*

To learn more, go to [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP)



Centers for Disease  
Control and Prevention  
National Center for Injury  
Prevention and Control

**Concussions affect each child and teen differently.** While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' health care provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.



## What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

Children and teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious and can affect a child or teen for a lifetime. It can even be fatal.

Revised 5/2015

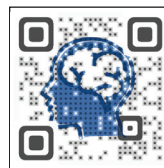
## What Should I Do If My Child or Teen Has a Possible Concussion?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.



To learn more, go to [www.cdc.gov/HEADSUP](http://www.cdc.gov/HEADSUP)

You can also download the CDC **HEADS UP** app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.

**Discuss the risks of concussion and other serious brain injury with your child or teen and have each person sign below.**

*Detach the section below and keep this information sheet to use at your children's or teens' games and practices to help protect them from concussion or other serious brain injury.*

☐ I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

Athlete Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Athlete Signature: \_\_\_\_\_

☐ I have read this fact sheet for parents on concussion with my child or teen and talked about what to do if they have a concussion or other serious brain injury.

Parent or Legal Guardian Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian Signature: \_\_\_\_\_

# A Fact Sheet for **ATHLETES**

## **HEADS UP CONCUSSION**

### **WHAT IS A CONCUSSION?**

A concussion is a brain injury that affects how your brain works. It can happen when your brain gets bounced around in your skull after a fall or hit to the head.

This sheet has information to help you protect yourself from concussion or other serious brain injury and know what to do if a concussion occurs.

### **WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?**

#### **REPORT IT.**

Tell your coach and parent if you think you or one of your teammates may have a concussion. You won't play your best if you are not feeling well, and playing with a concussion is dangerous. Encourage your teammates to also report their symptoms.



#### **GET CHECKED OUT BY A DOCTOR.**

If you think you have a concussion, do not return to play on the day of the injury. Only a doctor or other health care provider can tell if you have a concussion and when it's OK to return to school and play.



#### **GIVE YOUR BRAIN TIME TO HEAL.**

Most athletes with a concussion get better within a couple of weeks. For some, a concussion can make everyday activities, such as going to school, harder. You may need extra help getting back to your normal activities. Be sure to update your parents and doctor about how you are feeling.



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#### **GOOD TEAMMATES KNOW:**

IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.



## HOW CAN I TELL IF I HAVE A CONCUSSION?

You may have a concussion if you have any of these symptoms after a bump, blow, or jolt to the head or body:



..... **Get a headache**



..... **Feel dizzy, sluggish or foggy**



..... **Be bothered by light or noise**



..... **Have double or blurry vision**



..... **Vomit or feel sick to your stomach**



..... **Have trouble focusing or problems remembering**



..... **Feel more emotional or "down"**



..... **Feel confused**



..... **Have problems with sleep**

A concussion feels different to each person, so it's important to tell your parents and doctor how you feel. You might notice concussion symptoms right away, but sometimes it takes hours or days until you notice that something isn't right.

## HOW CAN I HELP MY TEAM?

### PROTECT YOUR BRAIN.



All your teammates should avoid hits to the head and follow the rules for safe play to lower chances of getting a concussion.

### BE A TEAM PLAYER.



If one of your teammates has a concussion, tell them that they're an important part of the team, and they should take the time they need to get better.



*The information provided in this document or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to a physician or other health care provider.*



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## **Hoverla Soccer Academy Concussion Safety Protocol**

### **Introduction**

Hoverla Soccer Academy is committed to protecting the health of and providing a safe environment for each of its participating athletes. We recognize that soccer is a high risk sport for concussion. To this end, Hoverla Soccer Academy has adopted the following Concussion Safety Protocol for all athletes. This protocol identifies expectations for the club's concussion management practices as they relate to (1) the definition of sport related concussion; (2) preseason education; (3) recognition and diagnosis; (4) post-concussion management; and (5) return-to-learn & sport.

### **1. Definition of Sport-Related Concussion**

The Consensus Statement on Concussion in Sport, which resulted from the 5th international conference on concussion in sport, defines sport-related concussion as follows:

Sport-related concussion (SRC) is a traumatic brain injury induced by biomechanical forces. Several common features that may be utilized to clinically define the nature of a concussion head injury include:

- SRC may be caused either by a direct blow to the head, face, neck or elsewhere on the body with an impulsive force transmitted to the head.
- SRC typically results in the rapid onset of short-lived impairment of neurological function that resolves spontaneously. However, in some cases, signs and symptoms evolve over a number of minutes to hours.

- SRC may result in neuropathological changes, but the acute clinical signs and symptoms largely reflect a functional disturbance rather than a structural injury and, as such, no abnormality is seen on standard structural neuroimaging studies.
- SRC results in a range of clinical signs and symptoms that may or may not involve loss of consciousness. Resolution of the clinical and cognitive features typically follows a sequential course. However, in some cases symptoms may be prolonged.

## **2. Preseason Education**

All athletes and parents of minor athletes will be provided and allowed an opportunity to discuss educational material and be required to sign an acknowledgement, on an annual basis and prior to participation, that they have been provided, reviewed and understood the concussion education material.

All coaches involved in athlete health and safety decision making are required to complete concussion education training prior to coaching and annually thereafter. Coaches must be allowed an opportunity to discuss educational material and be required to sign an acknowledgement, on an annual basis, that they have been provided, reviewed and understood the concussion education material.

Concussion education should include:

- The definition of concussion
- Possible mechanisms of injury
- Common signs and symptoms
- Steps that can be taken to prevent concussions and other injuries from occurring in soccer
- What to do when an athlete has suffered a suspected concussion or more serious head injury
- What measures should be taken to ensure proper medical assessment
- Return-to-School and Return-to-Sport Strategies
- Return to sport medical clearance requirements

## **3. Recognition and Diagnosis of Concussion**

All coaches in a member club must be able to recognize the potential mechanism of injury of a concussion and the signs and symptoms of acute concussion. Coaches must immediately discontinue training or competition for anyone who is suspected of having a concussion and must monitor the athlete until a parent arrives. Coaches must be able to recognize red flag signs and symptoms and must activate 911 if these signs and symptoms are present.

Any athlete that exhibits signs, symptoms or behaviors consistent with concussion:

- Must be removed from practice or competition until they are evaluated by a medical professional.
- Must be evaluated by a physician (or physician designee) with concussion experience.
- May only return to play the same day if onsite medical personnel determine that concussion is no longer suspected.

#### **4. Post-concussion Management**

Activation of emergency action plan must occur for any of the following scenarios following a suspected concussion:

- Severe or worsening headache
- Weakness or numbness in the arms or legs
- Vomiting
- Slurred speech
- Neck pain
- Double vision
- Seizure activity or convulsions
- Agitated or combative
- Loss of consciousness or deteriorating conscious state (going in and out of consciousness)

Because concussion may evolve or manifest over time, for all suspected or diagnosed concussions, athlete should be monitored by club personnel trained in concussion until a parent arrives. An athlete should never be allowed to drive him/herself home after a suspected concussion.

For all cases of suspected or diagnosed concussion, there must be documentation that post-concussion plan of care was communicated to both the athlete and another adult responsible for the athlete.

#### **5. Return-to-Learn & Sport**

Prior to return to soccer after a concussion event, the athlete must be symptom free with all activities of daily living and academic activities. Performance of academic activities must be back to the athlete's baseline and without modification.

Return-to-sport progressions should not begin until the athlete has completed an unrestricted return-to-learn progression. Initiation of the return-to-sport protocol must be approved by a physician or his/her medically qualified designee.

The timeline for return-to-sport varies based on individuals and other medical conditions including prior history of concussion. It generally takes longer for children and adolescents to return-to-sport than it does for adults.

Final determination of unrestricted return-to-sport will be made by a physician or his/her medically qualified designee following implementation of an individualized, supervised stepwise return-to-sport progression.

**NOTE:** If at any point the athlete experiences a return of concussion-related symptoms, they should go back to the previous stage that they completed symptom-free, wait for symptoms to resolve (minimum 24 hours), and then begin the progression again. The minor athlete's parent should always be notified if the athlete becomes symptomatic.

**Hoverla Soccer Academy  
Concussion Management Plan**

By signing and dating this form, I hereby acknowledge, that I will adhere to the club's Concussion Safety Protocol.

***Coach/Parent of Minor Athlete/Athlete***

Print Name: \_\_\_\_\_

Minor Athlete's Name: \_\_\_\_\_

Sign: \_\_\_\_\_

Date: \_\_\_\_\_