



SYSA Select & Development Player Commitment Letter

There will be an expected amount of commitment to the SYSA Select Program. As a parent or a Select player you will be expected to follow the guidelines and parameters as set forth in this document.

GENERAL

- Commit to all information written in the Select Overview (on website under Devel/Select tab)
- Parent/guardian participation is necessary to ensure a successful program and parents/guardians must be prepared to travel their player practices, and out of town games and tournaments.

ATTENDANCE

As a Select player you will be expected to:

1. Attend all mandatory practices and games
2. Arrive at least 15 minutes before practice starts.
3. Provide a valid reason to the coaching staff if you are to be late or absent from any session, give 24 hours notice.

CONDUCT

As a Select player representing the Shuswap Youth Soccer Association you will be expected to:

1. Respect all others including teammates, opponents, coaches and officials at all SYSA events.
2. Refrain from any verbal or physical abuse.

Players failing to comply with any of the Select program rules and regulations set forth in the Select Overview may be excluded from games or training sessions and if deemed serious enough there may be disciplinary action taken with ultimately a dismissal from the program. All abuse is unacceptable and will be dealt with immediately.

I _____ (player) have read the above document and understand that being involved in the Shuswap Youth Soccer Association Select Program is a big commitment. I will give my full commitment to the program and will train and play to the best of my ability.

Player Signature

Date

As a Parent/Guardian of the above soccer player I understand the commitment my child must make to belong to a Shuswap Youth Soccer Association's Select team and I will assist my child in adhering to expectations above.

Are you interested in volunteering for your child's Select program? If you circle "yes" we will contact you and discuss your strengths and how you can help the program. Please circle: YES NO

Print Name Guardian

Guardian Signature

Date