



2018 – US YOUTH SOCCER MASSACHUSETTS STATE CUP

TEAM STATEMENT OF COMPLIANCE

I, _____ am the coach/manager of the _____
Type Name Type Team Name

Gender: _____ Age Group: __U

On behalf of the team, I hereby state the following:

1. All players are age appropriate for this team.
Section 2 of Rule 221 of the US Youth Soccer National Championships Policy reads, in part:
(c) A team may have on its team roster only players of the following age groups for the seasonal year in which the team is participating in the National Championships
(1) For teams competing in the 13U, 14U and 15U age groups, each player on the team must be (A) of the age of the age group competition in which the team is participating in that seasonal year, or (B) of the age in either of the next 2 younger age groups of that age group competition in which the team is participating in that seasonal year.
(2) For the teams competing in the 16U, 17U, 18U, and 19U age groups, each player on the team must be (A) of the age of the age group competition in which the team is participating in that seasonal year, or (B) of the age of any younger age group, through the 14U age group, of that age group competition in which the team is participating in that seasonal year.
2. All players and adults are properly registered and affiliated with Massachusetts Youth Soccer and US Youth Soccer. To become validated upon registration payment and submission of team roster with required information.
3. I do not have more than 5 rostered players who were previously rostered during the current seasonal year with a club other than the club of which this team is a member.
4. If I have international players (*defined as all children born outside of the United States, including US Citizens*) they have been properly cleared by US Soccer/FIFA prior to placing them on my State Cup roster and I have submitted a list of such players to Terri Filippetti tfilippetti@mayouthsoccer.org
5. I understand that my team must be entered in the competition of the State Association in which at least 50% of its players are registered/reside.
6. My team will demonstrate continuity of rosters between league and State Cup by maintaining a minimum of 9 players common to both competitions.
7. My team will compete in a Massachusetts Youth Soccer approved qualifying league for US Youth Soccer National Championship Series play. All qualifying league requirements will be fulfilled (13U to 18U).
8. My State Cup roster does not contain any player who has been previously rostered to another 2018 State Cup roster (within the United States).
9. I understand that my team will be subject to a \$500.00 fine for each State Cup forfeited game.
10. I understand that should my team decided not to participate in either the US Youth Soccer East Region Championships or the US Youth Soccer National Championships, that my team will be responsible for **all** State, Regional and National penalty fees.
11. For teams playing in the NEP, NSL or any other US Club Soccer affiliated leagues: I understand that the modified Mass Youth Soccer/US Youth Soccer registration and affiliation fee does not provide any Excess Medical, Liability or other insurance coverages to the players, teams, coaches or administrators. These coverages will be the current insurance inforce provided by the team’s affiliation with US Soccer Youth Council member association (i.e. US Club Soccer).

_____, _____, _____
Signature Title Date (mm/dd/yyyy)

The act of submission of this form to Mass Youth Soccer, whether or not signed by or on behalf of the team’s coach, constitutes (a) an assertion on behalf of the team and the club that all of the above statements are true and that the team meets all requirements for participation in the 2018 US Youth Soccer Massachusetts State Cup, and (b) an acknowledgment by both team and club that they are aware of and fully bound by all rules, regulations and procedure applicable to participation in the State Cup.