



TEAM CHECK IN CHECK LIST

-TEAM LABEL-
(Tournament Use Only)

GENDER: Boys Girls AGE: U-____

TEAM NAME: _____

COACH NAME: _____ Cell #: (____) _____

MANAGER NAME: _____ Cell #: (____) _____

Coach or Manager is to check each of the lines below upon completion. Once completed, UPLOAD THIS DOCUMENT along with #1 through #5 below. Be sure to sign the bottom of this form and all boxes are checked with the task completed.

- #1 Certified Roster – issued by State / Provincial Association (must list player name, birth date and jersey #) Guest Players - Max of 3, verify age (must have passes and med forms) – write player’s name(s), birthdate(s), and jersey # at the bottom of the roster.
- #2 Coaches and Manager Passes (must provide copy of front and back)
- #3 Players Passes/Passbooks (If Date of Birth, Player ID#, and picture are all on the front of the pass, we do not need a copy of the back. If any of this information is on the back of the pass, we will need a copy of the front and back.)
- #4 Completed LSC Medical/Liability Waiver Form for each player & guest player. (MUST USE THE FORM PROVIDED BY THE TOURNAMENT ON OUR WEBSITE)
- Team, family, and spectators have received, read, and understand the Concussion Procedure and Protocol from US Soccer. (See website)
- Team, family, and spectators have received, read, and understand the Tournament Rules. (See website)
- Team, family, and spectators have received, read, and understand the Zero Tolerance Policy enforced by NYSWYSA and RDYSL. (See website)
- Team, family, and spectators have received, read, and understand the Tournament FAQ Sheet. (See website)
- Team bag pick – PLEASE SEE WEBSITE**
- Coach and Manager have verified that the cell phone numbers and e-mail addresses, which have been entered in the Team’s database for GotSport are accurate and up to date.
- Coach and Manager will check the Tournament website on the Thursday & Friday of the tournament weekend for any schedule updates.
- Team has reviewed Field Maps with Team parents and have notified them that Maps and directions can be found on the website www.lakefrontsc.com.
- Verify that all players have proper passport or other credentials, which will permit entry into the U.S.

Coach / Manager to sign below

I certify to Lakefront Soccer Club, and to the owner(s) of each venue/field in the Lakefront Classic Showcase, that the following items will be in the possession of the team official in attendance at each of our team’s matches in the Lakefront Classic Showcase: Medical Release/Liability forms; Concussion Protocol and blank forms; team certified roster; Player’s, Coach’s and Manager’s passes. These documents will be surrendered to tournament officials upon request. I will not permit any coach, manager or player to participate in the tournament who fails to have the foregoing documentation present at the field and/or whose credentials have not been verified by tournament officials. I also understand that the tournament is conducted under the Zero Tolerance Policy established by New York State West Youth Soccer Association and Rochester District Youth Soccer League. The team has reviewed the **Tournament Rules**. I understand if our team is in violation of any of the foregoing, our team will forfeit one or more games at the discretion of the Tournament Committee and will be subject to the sanctions of the Tournament Rules and Zero Tolerance Policy. There shall be no protests and no refunds.

Team Official

Date