

**CENTRAL PENNSYLVANIA YOUTH SOCCER LEAGUE  
HIGHER AGE/DIVISION CONSENT FORM**

Players should only play up in an age/division when their physical capacity and social sense enables them to compete adequately at the higher age/division and should be based on the advantages to be gained by the player, not just to make up numbers to generate a team.

The age difference for players participating on a team in CPYSL shall not be greater than two (2) years for players whose true age of eligibility is for U14 Divisions & under, and three (3) years for players whose true age of eligibility is U15 or older. Any player requesting to play up in age more than two (2) years at the U14 & below ages or three (3) years at the U15 & older age groups will require the Club of the player to petition the respective CPYSL VP for acceptance at the requested level.

In addition to the Player's Club request for considerations to play up in age/division, CPYSL requires permission from the parent/guardian for any soccer player requesting to play up in age/division higher than CPYSL recommended Guidelines and for this request to be filed by the registered players club. The intent is to clearly communicate to the parent/guardian the risks involved with a younger child playing soccer with older, likely larger physically, and more skillful than the requesting player.

Before giving approval for the player to play at the requested level, please consider the applicant's maturity, size, coordination, muscular development, attitude, and social development in comparison to the team members of the older team.

**Checklist (to be completed by Requesting Club Registrar):**

\_\_\_\_\_ Club request for consideration emailed to respective CPYSL Vice President (Boys/Girls), copies to CPYSL Executive Administrator (Mandatory)

\_\_\_\_\_ Documentation/Unbiased opinions from third party acknowledging players ability to play at requested level. (recommended)

\_\_\_\_\_ Video or documentation supporting request.

*Can be from Team Coach or player's HS Coach stating they are playing at a varsity high school level, opposing coaches, mentors, soccer camp directors, high school athletic director.*

**Applicant Information**

Name: \_\_\_\_\_  
Present Team \_\_\_\_\_  
Requested Team \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Parent's Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Parent's e-mail: \_\_\_\_\_

**I/We hereby give permission for my/our son/daughter stated above to play in the higher age/division noted on this request. I/We are aware of the increased risks that our son/daughter will be exposed to both physically and mentally by playing in a higher age/division.**

Parent/Guardian Name:

\_\_\_\_\_  
Parent/Guardian Signature:

\_\_\_\_\_  
On behalf of the (club name requesting permission):

**We hereby give permission for the above noted player to play in the requested age/division also noted above. We are aware of and have explained the increased mental and physical risks of playing in a higher age/division to both the player and their parents/guardians.**

**Club Representative name:**

\_\_\_\_\_  
Club Representative Signature:

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