



RETURN TO PLAY FROM INJURY OR MEDICAL ISSUE

This form is a declaration that the player below is fit and healthy to return to play soccer in the capacity as detailed.

This form is mandatory and **MUST** be completed, then e-mailed to info@chestermereunited.com with a copy to the team Coach in order to comply with the established CUFC Return to Play Protocol.

*This form is **NOT** to be used for players returning from concussion injuries - **ONLY** a medical release is acceptable for concussion injuries.*

Player Name: [Please print]	
CUFC Team: [Please print]	

PARTIAL RETURN

Complete this section ONLY if the above player is able to return to soccer training, and other related activities in a limited capacity.	
Date of Occurance:	
Details:	
Treatment details: [Please attach any doctors note]	
Playing restrictions: (e.g. No contact)	

FULL RETURN

Complete this section if the above player is fit and healthy to return to play soccer in a full contact capacity at training, games and other soccer-related activities.	
Date of Occurance:	
Details:	
Treatment details: [Please attach any doctors note]	
Special requirements: (e.g. knee brace)	

ONLY VALID IF SIGNED ON PAGE 2



CHESTERMERE UNITED FC

SIGNATURES:

Parent or Guardian must sign this waiver if the participant is under the age of 18.

The signing of this form releases CUFC and its representatives of any liability in relation to the injury detailed above, whether a full return to play or partial return is declared.

I for myself, my heirs, executors, administrators and assigns, do hereby release CUFC, its employees and agents, from any claims, damages or causes of action arising out of or in connection with any injury to my person incurred while attending or participating in a CUFC event or game. I further agree to indemnify CUFC or its employees and agents from any claim or demands which might be made against the CUFC arising out of consequence of my attendance at or participation in any event or game at the CUFC.

Player: (If over 18 years old)	Print:	Sign:
Parent/Guardian: (if under 18 years old)	Print:	Sign:
Club official received:	Print:	Sign:
Date:		

The Return to Play Form **MUST** be completed prior to the player returning to a practice or a game, either electronically or in paper format.

To ensure that both the CUFC Office and the relevant team staff have copies of the Return to Play Form, follow the steps below:

- 🕒 Copies sent electronically directly to the CUFC Office or to the team staff **MUST** be signed as received and then e-mailed to either the relevant team staff or CUFC Office.
- 🕒 Paper copies received by the CUFC Office or by the team staff **MUST** be signed as received and then a copy sent to the relevant team or to the CUFC Office.