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9035 E Pima Center Parkway Suite 10 Scottsdale, AZ 85258

Injuries

At some point in the season, you may have a Player sustain an injury during sanctioned soccer events. A sanctioned event is defined as a meeting, practice, scrimmage, game, or tournament where the governing body approves team or individual participation and will cover that participation with insurance. Each Player Pass is not only an identification piece but also a proof of insurance card for the listed Player / Coach / Administrator from the issuing governing body.

Important Injury and Coverage Information

- If you are using US Youth Soccer (Youth Academy, MIMOL, APL, ASL1, ASL2, NL Club Premier 1 or 2), US Club Soccer (ECNL, ECNL-RL), MLS Next Academy, or MLS Next Academy New Tier Passes, keep them separate on their own ring. **You cannot combine Player Passes from different affiliations for any event.**
- When playing in a tournament, your Player Passes can only be used at events sanctioned by their governing organization to guarantee insurance coverage for your team. Each tournament will have a **“Sanctioning or Hosting Document,”** which lists what governing body it is affiliated with and what Player Passes they will accept. You cannot use your Player Passes if the tournament is not sanctioned or approved by the Player Passes you are using’s governing body (US Youth Soccer, US Club Soccer, MLS Next Academy). Check with the Tournament Director for alternative insurance and Player Pass identification options. **DO NOT EVER PLAY IN A TOURNAMENT WITHOUT INSURANCE!**
- **PROMPT COMMUNICATION IS THE KEY.** Once you are made aware of an injury situation, start the documentation (Injury Reports) and notification process (Parent(s) / Club Administrators) immediately. There are procedures to follow, submission timelines, documentation completion requirements, financial implications, and medical options to consider that can cause issues the longer an injury goes unreported, including denial of coverage, medical care options, and financial expenditures. There are no shortcuts in the insurance, documentation, medical clearance, or return-to-play processes. Follow the processes to avoid insurance coverage, medical clearance, and participation challenges.
- **NEVER SAY THAT INSURANCE WILL COVER IT.** Each insurance policy will cover certain medical conditions, procedures, therapies, services, transportation, and facilities. Do not offer any opinions, which may or may not be true, to a family where the family thinks they will be covered financially because of your statements when they may not. It is the responsibility of the family to manage their medical treatment, insurance coverage, and expectations when an injury situation occurs. A family should always ask their provider(s) what procedures, therapies, services, transportation, and facilities may or may not be covered by insurance. **A family must manage their own care and medical choices.** They are under no obligation or requirement to use specific medical services and are free to choose the medical provider(s) that fit their needs, geography, finances, and insurance.



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Injuries and Insurance

Using Arizona Soccer Association (ASA) Soccer Passes

(Youth Academy, MIMOL, APL, ASL1, ASL2, NL Club Premier 1 or 2)

At Your Game or Event

If you are using Arizona Soccer Association (ASA) Player Passes for Youth Academy, MIMOL, APL, ASL1, ASL2, NL Club Premier 1 or 2, or any other ASA-sponsored league / tournament / event, you are covered by ASA's (US Youth Soccer) insurance program.

At some point in the season, you may have a player sustain an injury during sanctioned soccer events. As part of each Player's registration (Player Passes) with the [Arizona Soccer Association](#) (ASA), supplemental insurance is included. This insurance is designed to work in cooperation with each family's primary insurance provider. It is our understanding that if a family does not have a primary insurance provider, the supplemental insurance will become their primary insurance. **Please confirm this detail with all providers you work with to manage coverage and expectations when an injury situation occurs. Always ask your provider(s) what procedures / therapies / services / facilities / transportation may or may not be covered by this insurance.**

Listed below is the ASA Injury Report Form. It is highly recommended that a Team Manager has multiple copies of this document at the field of each soccer event your team attends to give to the parents of any injured player at the time of the injury.

IMPORTANT – Coaches must sign the ASA Injury Report Form before it is submitted, and you have thirty (30) calendar days from the date of injury to submit a claim. This is why it is beneficial to have them available at your events (practices, scrimmages, league games, tournaments, etc . . .). There is currently a \$2,500 Deductible and 70 / 30 Co-Insurance that applies to each covered accident with this policy. A Physical Therapy / Chiropractic limit of \$50 per visit / \$2,000 maximum per injury also applies. Payment will not be made for any expense incurred after fifty-two (52) weeks from the date of injury.

- [ASA Injury Report Form](#) – Fill out all information and have your Coach sign the form.
- [ASA Injury Report Form Español](#) – Fill out all information and have your Coach sign the form.
- **ASA Online Claim Form Submission** – The link to the online Accident Medical Claim will be provided by ASA after completion and submission of the ASA Injury Report Form to medical@azyouthsoccer.org.
- **ASA Insurance Coverage Outlines** (September 1, 2025 – August 31, 2026).
- **ASA injury and insurance questions can be sent to** medical@azyouthsoccer.org.

Note – ASA policy coverage, deductibles, procedures, or providers are subject to change, without notification to Phoenix Rising FC Youth Soccer, at any time.



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Injuries and Insurance **(Using US Club Soccer Passes (ECNL, ECNL-RL)** **At Your Game or Event**

If you are using US Club Soccer Player Passes for ECNL, ECNL-RL, or any other US Club Soccer league / tournament / event, you are covered by US Club Soccer's insurance program.

At some point in the season, you may have a player sustain an injury during sanctioned soccer events. As part of each Player's registration (Player Passes) with [US Club Soccer, supplemental insurance](#) is included. This insurance is designed to work in cooperation with each family's primary insurance provider. There is currently a \$500.00 Deductible and 80 / 20 Co-Insurance that applies to each covered accident with this policy. A Physical Therapy / Chiropractic limit of \$100 per visit / \$1,000 maximum per injury also applies. Payment will not be made for any expense incurred after fifty-two (52) weeks from the date of injury. It is our understanding that if a family does not have a primary insurance provider, this supplemental insurance will become their primary insurance. **Please confirm this detail with all providers you work with to manage coverage and expectations when an injury situation occurs. Always ask your provider(s) what procedures / therapies / services / facilities / transportation may or may not be covered by this insurance.**

- US Club Soccer Insurance Page – [Click Here](#).
- Insurance Program Summary (Youth Summary 2025-26) – [Click Here](#).
- US Club Soccer Claims Page – [Click Here](#).
- US Club Soccer – **Online Claim Form (Youth) Submission** – [Click Here](#). Access the online claim portal, create an account, or sign in to an existing account, then follow the instructions shown once you are logged in.
- **Timeline** – The **Online Claim Form (Youth)** must be properly completed and **submitted to US Club Soccer no later than ninety (90) days after the date of injury, and medical attention must be received no later than sixty (60) days after the date of injury.**
- US Club Soccer Insurance Questions and US Club Soccer approvals can be submitted to insurance@usclubsoccer.org.

Note – US Club Soccer policy coverage, deductibles, procedures, or providers are subject to change, without notification to Phoenix Rising FC Youth Soccer, at any time.



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Injuries and Insurance

(Using MLS Next Academy or MLS Next Academy New Tier Soccer Passes)

At Your Game or Event

If you are using MLS Next Academy or MLS Next Academy New Tier Player Passes for your league / tournament / event, you are covered by MLS Next's insurance program.

At some point in the season, you may have a player sustain an injury during sanctioned soccer events. As part of each Player's registration (Player Passes) with [MLS Next Academy](#), [supplemental insurance](#) is included. This insurance is designed to work in cooperation with each family's primary insurance provider. There is currently a \$1000.00 Deductible and 80 / 20 Co-Insurance that applies to each covered accident with this policy. A Physical Therapy limit of \$1,500 maximum per injury also applies. Payment will not be made for any expense incurred after fifty-two (52) weeks from the date of injury. It is our understanding that if a family does not have a primary insurance provider, this supplemental insurance will become their primary insurance. **Please confirm this detail with all providers you work with to manage coverage and expectations when an injury situation occurs. Always ask your provider(s) what procedures / therapies / services / facilities / transportation may or may not be covered by this insurance.**

- MLS Next Insurance FAQ Page – [Click Here](#).
- **Medical Approval Form** – To be completed for the following services that require preapproval: Surgeries, MRI's, CT Scans, Durable Medical Equipment, and Physical Therapy.
- **Claim Form Reporting Instructions** – [Click Here](#).
- **Participant Insurance Claim Form (Online Submittal)** – [Click Here](#).
- **Timeline** – The **Participant Insurance Claim Form** must be properly completed and **submitted to MLS Next no later than seventy-two (72) hours of the date of injury, and medical attention must be received no later than ninety (90) days after the date of injury.**
- MLS Next Insurance Questions can be submitted to daclaims@fairlygroup.com, and PlayerDevelopmentClaims@mlsplayerdevelopment.com, and HSR at (800) 328-1114.

Note – MLS Next policy coverage, deductibles, procedures, or providers are subject to change, without notification to Phoenix Rising FC Youth Soccer, at any time.



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Phoenix Rising FC Youth Soccer Concussion Policy & Concussion Injury Process

As part of the Phoenix Rising FC Youth Soccer Concussion Program, we require all Coaches, Team Managers, Parents, and Players to follow a standard procedure when our athletes suffer a potential head injury and / or a suspected concussion.

The Phoenix Rising FC Youth Soccer Concussion Policy, Concussion Injury Process, and Documentation / Medical Clearance Requirements will supersede all other league, tournament, and organizational entity requirements or non-requirements.

A Referee or Coach can pull a Player from a game if they suspect a head injury or a possible concussion. If a Player is pulled from the game, the Player's pass may or may not be retained and sent to a league office or tournament headquarters. The Referee is required to document the injury and may fill out an online report through the GotSoccer / GotSport platform, depending on league, tournament, or organizational policy. The absence of this report does not discount the possible injury or circumvent Phoenix Rising FC Youth Soccer policies and "Return to Play" guidelines. Each league, tournament, event, or governing organization may follow different procedures regarding notification and pass retention.

If a Player's pass is or is not retained for a possible head injury, a Player has sustained a possible head injury in any soccer event (i.e. practice / game / tournament), a player has sustained a possible head injury outside of soccer activities (i.e. school / home / ODP / other sport), or there is a suspicion of a possible concussion, that Player must **immediately** be removed from all soccer activities and **CANNOT** return to play/participate in any practice, team event, tournament, or game without written medical clearance from a Medical Doctor (MD) or Doctor of Osteopathy (DO). This means **ANY AND ALL** soccer events including those governed by the Arizona Soccer Association (Youth Academy, MIMOL, APL, ASL1, ASL2), US Club Soccer (ECNL, ECNL-RL), US Youth Soccer (NL Club Premier 1 or 2), MLS Next Academy, MLS Next Academy New Tier, or any other entity; league or governing body affiliation does **NOT** matter. This restriction to participation cannot be lifted without a written medical clearance, regardless of the Player's observed condition, their insistence of "being alright," or even parental permission, and regardless of the length of time it takes to receive medical clearance – **No Exceptions!** Upon return to soccer activities, Players and Coaches will follow the Phoenix Rising FC Youth Soccer Return to Play Progression and guidelines, including the submittal of **ALL** required Phoenix Rising FC Youth Soccer documentation, before full participation will be authorized.

IMPORTANT – Brad Clement, Phoenix Rising FC Youth Soccer VP of Competitive, **MUST** be notified **immediately** of the injury at bradc@prfcyouthsoccer.com to begin the Documentation / Insurance / Diagnosis / Treatment / Clearance / Return to Play process.

Phoenix Rising FC Youth Soccer (Brad Clement - VP of Competitive and Polly Robinson – Club Registrar) must receive and evaluate a signed copy of the medical clearance to "Return to Play" before any Club participation will be authorized.

Parents of any injured Player, whether at a game, practice, tournament, or team event, must be contacted immediately and informed of the injury. **DO NOT WAIT** until after the event has concluded to begin notification. This is an immediate Coach / Team Manager to the Parent phone call. Email and text messaging are only secondary notification methods. **Do not let injured or suspected injured Players leave any soccer event without the accompaniment of a Parent or responsible adult.** If in doubt, utilize 911 emergency responders. Phoenix Rising FC Youth Soccer's VP's of Competitive, Directors of Coaching (DOC's), and Club Registrar must also be notified regarding any injured player and / or retained player pass due to injury.



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The Process to Follow When There is a Potential Head Injury (**Follow the Flow Chart**)

1. When there is a possibility of a potential head injury or potential concussion, **the Player is immediately removed from ALL Phoenix Rising FC Youth Soccer activities**. In order for any Player to return to practices, games, or team activities, they will have to be seen and cleared by a Medical Doctor (MD) or Doctor of Osteopathy (DO) with the Club-supplied paperwork completed, signed, and turned in. This includes potential head injuries or potential concussions wherever they may have occurred (**Examples:** at home, during high school soccer, ODP, when traveling), even if it was not at or representing Phoenix Rising FC Youth Soccer activities.
2. Immediately notify the Phoenix Rising FC Youth Soccer VP of Competitive, Brad Clement, at bradc@prfcyouthsoccer.com of the potential injury. **Notification must be made immediately**, as there are insurance timelines and specialist care options available to injured Players should they choose to utilize them. **Please include in the notification email:**
 - The Player's Complete Name
 - The Player's Complete Team Name
 - The Date / Place / Time of the Potential Injury
 - The Contact Information (Names, **Emails**, & Cell Phones) of the Player's Parents
 - The Team Coach's and Team Manager's Name and Email
 - The Particulars and Circumstances of the Player's Potential Injury
3. Upon notification, the Parent(s) will receive the **Phoenix Rising FC Youth Soccer Concussion Injury Packet**. The Parent(s) should print it out and bring it to all of the Player's medical appointments. You will need to have the Medical Doctor (MD) or Doctor of Osteopathy (DO) complete (**initial and sign**) the appropriate section(s) of the **Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form** at each appointment. You will need the **Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form** at each step throughout the process for the Player to begin soccer activities again.
4. Upon notification, the Parent(s) will also receive a **Supplemental Concussion Insurance Claim Form** if the potential concussion injury occurred during Phoenix Rising FC Youth Soccer-approved events. Phoenix Rising FC Youth Soccer provides this supplemental insurance to all of our Phoenix Rising FC Youth Soccer Competitive Program Players. It works as a supplemental policy to the family's primary insurance, has no deductible, and has a \$25,000 yearly limit. The **Phoenix Rising FC Youth Soccer Concussion Injury Packet** includes a **Healthcare Provider Letter** to submit to any medical provider they see to activate the billing portion of the policy. The Parent(s) must fill out the **Supplemental Concussion Insurance Claim Form**, **every question and every box in all sections**, in its entirety, and **submit it themselves** to The Hartford at claims@nahga.com or P.O. Box 189 Bridgton, ME 04009 (contact information listed on the bottom of page 1) or through our Broker at claims@monumentsports.com **but NOT BOTH**. You have thirty (30) calendar days from the date of the incident to submit the claim form, **and the Club Administrator must sign and date the form**.

IMPORTANT: Please confirm insurance information with all providers you work with to manage coverage and expectations when an injury situation occurs. Always ask your provider(s) what procedures / therapies / services / facilities / transportation may or may not be covered by this insurance, as **this insurance is a supplemental (limited pay) policy and does not cover all procedures / therapies / services / facilities / transportation**. Only the procedures / therapies / services / transportation that are considered standardly accepted medical treatment,



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non-experimental, may be covered under this policy. **Emergency room visits and transportation may or may not be covered by this policy.**

5. Phoenix Rising FC Youth Soccer has a working relationship with the Banner Concussion and Sports Medicine Center, and they are specialists who deal with concussion injuries and concussion treatment. They are very familiar with Phoenix Rising FC Youth Soccer athletes and our supplemental insurance program. Their information is also located within the **Phoenix Rising FC Youth Soccer Concussion Injury Packet** and on our Club website, www.prfcyouthsoccer.com, in the **"Concussion Program"** section, should you choose to use their medical services or would like to contact them with questions or for more information. **You are under no obligation or requirement to use their services and are free to choose the medical provider(s) that fit your family's needs and insurance.**
6. If the Medical Doctor (MD) or Doctor of Osteopathy (DO) concludes that the Player **HAS NOT** suffered a concussion and the Player can return to athletic activities **without restrictions**, the Medical Doctor (MD) or Doctor of Osteopathy (DO) notates the finding, with the return date, in the **Initial Evaluation Section** of the **Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form** and **signs** the form. The family brings the **signed Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form** back to their Coach at practice and submits a copy, via email, to the Phoenix Rising FC Youth Soccer VP of Competitive, Brad Clement, at bradc@prfcyouthsoccer.com and to Polly Robinson, the Club Registrar, at pollyrobinson1997@gmail.com. **This signed and dated form must be received and evaluated by Brad Clement before a Player will be allowed to return to any normal activities and games with the Club.** The Player can then resume practice / game / team activities as advised by the Medical Doctor (MD) or Doctor of Osteopathy (DO) once the paperwork has been received and evaluated by Brad Clement. **This concludes the process.**
7. If the Medical Doctor (MD) or Doctor of Osteopathy (DO) concludes that the Player **HAS** suffered a concussion, the Medical Doctor (MD) or Doctor of Osteopathy (DO) notates the finding, with a follow-up appointment date, in the **Initial Evaluation Section** of the **Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form** and **signs** the form. The family keeps the **Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form** and uses it to notate in the **Follow-Up Evaluation Section** at each follow-up appointment and throughout the treatment process. Depending on the individual and the severity of the concussion, this process can take a significant amount of time and encompass multiple follow-up visits with a provider.
8. When the Medical Doctor (MD) or Doctor of Osteopathy (DO) concludes that the Player has reached the second box (#2) in the **Follow-Up Evaluation(s) Section** on the **Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form**, the Medical Doctor (MD) or Doctor of Osteopathy (DO) is stating that the Player is ready to return to a segmented and sequential level of activity by following the **Phoenix Rising FC Youth Soccer Return to Play Progression (5 Stages)**, **starting** with Stage 1. **This is NOT full medical clearance to return to any normal activities, practices, or games with the Club.**

IMPORTANT: Players cannot start the **Phoenix Rising FC Youth Soccer Return to Play Progression (5 Stages)** until they are cleared to do so by their Medical Doctor (MD) or Doctor of Osteopathy (DO) and not before the date the Medical Doctor (MD) or Doctor of Osteopathy (DO) lists on the form. Each Stage will last a minimum of twenty-four (24) hours between each Stage in which the returning athlete has no increase in symptoms through the Stage activities. If symptoms remain, increase, or occur, there is no advancement to the next Stage until there are twenty-four (24) hours between each Stage without an increase in symptoms.



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On the **Phoenix Rising FC Youth Soccer Return to Play Progression (5 Stages) Form**, each Stage must be initialed by the adult who supervised its completion, the date the Stage was completed, and the location where the Stage was completed. To help in Player participation and compliance, all Stages should be administered during the Player's normal practice schedule and at the practice location with their team, when appropriate. The Player's Coach would communicate and / or set up the appropriate Stage activities (walking, jogging, running, skill-work, etc . . .) for the Player to complete independently (**Stage 1, 2 & 3**), non-contact practice for the Player that is communicated to the team (**Stage 4**), and full contact, normal practice activities after medical clearance (**Stage 5**). **Before reaching Stage 5, the Player must be seen by their Medical Doctor (MD) or Doctor of Osteopathy (DO) to be cleared to move on to Stage 5.** Stage 4 and Stage 5 must be completed in a practice session. This may extend the Return to Play timetable if the Player's practice session has been concluded for the week before reaching one or both of these Stages. Game warm-up is not an acceptable alternative to a practice session.



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Phoenix Rising FC Youth Soccer - RETURN TO PLAY PROGRESSION (5 STAGES)

This form is to be used as a general guideline for a return to soccer activities after a diagnosis of concussion and medical clearance to return to play. The goal of the Return to Play Progression is for there to be **at least a twenty-four (24) hour period between each stage** in which the returning athlete has no increase of symptoms through the activity. If symptoms increase, then there should not be advancement to the next stage until the athlete can complete the stage, with at least a twenty-four (24) hour period between each stage, without any increase of symptoms. When possible, the Return to Play Progression should be done with the assistance of a medical professional. This Return to Play Progression should not be started until the athlete has been cleared to start the Return to Play Progression in the second box in the Follow-Up Evaluation section of the Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form. **All athletes will begin with Stage 1 following the Return to Play Progression clearance.** To help in athlete participation and compliance, all stages should be administered during the athlete's normal practice schedule and at the practice location with their team, when appropriate. **This form, with each stage dated and initialed, MUST BE RETURNED to Phoenix Rising FC Youth Soccer with the athlete's signed Phoenix Rising FC Youth Soccer Concussion Program: Physician Clearance Form.**

Stage 1: **Light Aerobic Activity**

Date Completed: _____

- **Goal** is to increase your heartrate
- **Activity:** Stationary biking, incline walking, elliptical, etc . . .
- **Duration:** 10 – 15 minutes of total activity

Supervised By's Initials: _____

Location (Ex. Practice, Home): _____

Stage 2: **Moderate Aerobic Exercise**

Date Completed: _____

- **Goal** is to return to base level of fitness
- **Activity:** Jogging, swimming, low level weight lifting, etc . . .
- **Duration:** 20 – 30 minutes of cardio activity

Supervised By's Initials: _____

Location (Ex. Practice, Home): _____

Stage 3: **Sport Specific Activity**

Date Completed: _____

- **Goal** is to return to activities that resemble the sport
- **Activity:** Sprinting, cutting, ball skills, etc . . . on the surface that the sport is played
- **Duration:** 45 – 60 minutes of total activity
- **Note:** The athlete needs to be asymptomatic at rest and attending school full-time before moving on to Stage 4

Supervised By's Initials: _____

Location (Ex. Practice, Home): _____

Stage 4: **Non-Contact Return to Practice**

Date Completed: _____

- **Goal** is return to the team setting of practice without entering into any contact activity, **including heading**
- Allow for reacclimation to being around other people
- Can be done in practice setting or with other athletes that understand the parameters
- Very important to make sure coaches, athletic trainers and other players work together in this phase

Supervised By's Initials: _____

Location (Ex. Practice): _____



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Phoenix Rising FC Youth Soccer - RETURN TO PLAY PROGRESSION (5 STAGES)

Stage 5: Full Contact Practice

- **Goal** is return to full practice so that the athlete feels comfortable competing in a game
- **Need medical clearance for progression to this stage**
- If all parties agree (medical team, coach, parents, athlete) then return to full clearance is the next phase

Date Completed: _____

Supervised By's Initials: _____

Location (Ex. Practice): _____

**** Again, it is very important to remember that the athlete must be symptom free for twenty-four (24) hours, after completing the activities described in one stage, before progressing to a new stage. Symptom free means no symptoms in the twenty-four (24) hour period following the completion of activity. Players must complete all stages to return to play. **Player safety and welfare is the only consideration.** Game availability is **NOT**.**