



USVISA Afterschool Program Narrative:

At the U.S. Virgin Islands Soccer Association, we take pride in our holistic approach. While our field is sport-Soccer, the educational and core life values that provide the backbone to our programs allow individuals to develop not just in sport, but as people.

We emphasize the importance of education. By placing high emphasis on education, players remember the importance of achieving in sport whilst still achieving in school. Academically, USVISA will evaluate each student by using standardized testing - a baseline testing when the students first arrive. USVISA shall contract a certified professional to do a pre-evaluation for each student using the "Math and English Diagnostic Achievement Battery fourth edition (by Phyllis L. Newcomer)." Here, each student will have 4 base assessment scores for evaluation:

1. Reading
2. Mathematics (calculation & reasoning)
3. Writing/Spelling
4. Spoken language (listening comprehension)

Additionally, USVISA will remain in contact with the schoolteachers to correspond everything within the student's report card performance. Here there will be a recording of each student average of completed homework assignments and their homework grades. USVISA will ensure its after-school teachers have weekly interventions and analysis to tally the progress of each student. At the end of each school semester, a certified professional will perform a post-evaluation assessment utilizing the aforementioned Diagnostic Battery.

Our soccer coaching methods focus on developing players to the best of their ability. Cognitive training is the core of USVISA coaching model and consists of habits and skills that supports further player development including:

- Decision Making
- Problem Solving
- Focus and Concentration
- Speed of Reaction
- Read the Game and Awareness
- Visualization and Imagination

U.S.V.I. Soccer Association After-school Soccer Academy





USVISA shall contract the certified professional services of "LifeLine Educational Services" to do a pre-evaluation for each student using the "Math and English Diagnostic Achievement Battery fourth edition (by Phyllis L. Newcomer)."

Informed Consent:

I hereby grant permission to LifeLine Educational Services to provide Psychological Educational Assessment. I have been informed of the nature and scope of such assessment and agree accordingly.

LifeLine Educational Services
170 Estate Two Brothers
Frederiksted, St. Croix 00840
340-642-7227

Student's Name: _____

Student's Date of Birth: _____ Student's Current Age _____

School Attending: _____

Parent/Guardian Name: _____

Telephone Number: _____

Email Address: _____

Home address: _____

Mailing Address: _____

Special Notes:

Please indicate if your youth player has a special diet and/or any medical conditions.

Diet: _____

Medical: _____

Please submit this form that includes insurance, waiver and player Psychological Educational Assessment.



RELEASE WAIVER

Parent/Guardian Name:

Signature:

Date: _____

I THE UNDERSIGNED IS A PARENT OR LEGAL
GUARDIAN OF _____

(CHILD'S NAME) HEREBY CONSENT TO HIS/HER PARTICIPATION IN ANY EVENT SPONSORED BY THE USVI SOCCER ASSOCIATION. I AS THE PARENT OR LEGAL GUARDIAN OF THE ABOVE NAMED CHILD, I DO ACKNOWLEDGE THAT PARTICIPATION IN SPORTING ACTIVITIES MAY INVOLVE TRAVEL. MY CHILD MAY BE EXPOSED TO CONSIDERABLE FORCE, RIGOROUS OUTDOOR ACTIVITIES, AND THAT THERE MAY BE A RISK OF MINOR OR EVEN SEVERE INJURIES OR EVEN THE POSSIBILITY OF CONTRACTING COVID-19. BY SIGNING I WILLINGLY AND VOLUNTARILY ACCEPT AND ASSUME ALL SUCH RISKS FOR MYSELF AND ON BEHALF OF THE ABOVE NAMED CHILD. BY ACCEPTING THE TERMS OF THE REGISTRATION AND PERMITTING THE VOLUNTARY PARTICIPATION OF THE ABOVE NAMED PARTICIPANT, I HEREBY RELEASE THE USVI SOCCER ASSOCIATION, ITS VOLUNTEERS, EMPLOYEES, OFFICIALS, SPONSORS, AND OTHER REPRESENTATIVES AND ALL OWNERS AND ENTITIES ALLOWING, PERMITTING OR AUTHORIZING THE USE OF THE AGENTS, EMPLOYEES, OFFICERS AND DIRECTORS OF SAID OWNERS OR ENTITIES FROM ANY CLAIMS, DEMANDS, COST EXPENSES AND COMPENSATION ARISING OUT OF OR IN ANY WAY RELATED TO ANY INJURY OR OTHER DAMAGE THAT MAY RESULT TO SAID PARTICIPANT. I UNDERSTAND THESE TERMS AND BY SIGNING I ACCEPT THEM ALL.