

INJURY PROTECTION PLAN

ELECTION & REFUND AGREEMENT

This Injury Protection Plan Election & Refund Agreement ("**Agreement**") is entered into by and between _____ ("**Parent/Guardian**") and _____ ("**Program/Organization**") for the player listed below.

The Program offers optional Injury Protection Plans designed to protect families from financial loss in the event of a season-ending injury. Participation is voluntary and must be elected at the time of registration (or prior to the start of the season).

***Season-Ending Injury** is defined as a medically documented injury that prevents the player from participating in the remainder of the season, as verified by a licensed medical professional and approved by the Program.*

PLAN OPTIONS — Select One

OPTION 1 — CREDIT PROTECTION PLAN

\$199

Provides **Program Credit Only** based on the timing of the season-ending injury.

Refund Tier Schedule (Program Credit):

Timing	Benefit
Prior to first scheduled event/practice	100%
After season start — before 25% of season completed	75%
After 25% — before 50% of season completed	50%
After 50% — before 75% of season completed	25%
After 75% of season completed	No Benefit

Credits:

- Valid for future Program participation only
- Non-transferable unless approved in writing
- No cash value

OPTION 2 — CASH BACK PROTECTION PLAN

\$299

Provides **Cash Refund** based on the timing of the season-ending injury.

Refund Tier Schedule (Cash Back):

Timing	Benefit
Prior to first scheduled event/practice	100%
After season start — before 25% of season completed	75%
After 25% — before 50% of season completed	50%
After 50% — before 75% of season completed	25%
After 75% of season completed	No Benefit

Refunds:

- Issued to original payment method when possible
- Processing time: up to 30 days after approval
- Protection Plan fee is non-refundable

DECLINE COVERAGE

I decline the Injury Protection Plan. I understand that by declining coverage, I assume full financial responsibility for all Program fees and acknowledge that no refunds, credits, or financial protection will be provided due to injury outside of the Program's standard policies.

TERMS & CONDITIONS

1. Protection Plan must be purchased prior to the start of the season.
2. Plan fee is non-refundable.
3. Medical documentation from a licensed medical professional is required.
4. The Program reserves the right to verify injury status.
5. Coverage applies only to season-ending injuries (not missed games, partial absences, or voluntary withdrawal).
6. This Plan is not insurance and does not cover medical expenses.
7. Refund percentage is based on the Program's determination of season completion.
8. Plan applies only to the registered season and player listed below.

PLAYER INFORMATION & SIGNATURES

Player Name _____

Date of Birth _____

Program / Team _____

Season / Year _____

Parent/Guardian Signature

Date

Program/Organization Signature

Date

This Agreement is not insurance. It does not cover medical expenses and is subject to the terms outlined above. A copy of this Agreement should be retained by both parties.