PARRY SOUND SOCCER CLUB
2010-2011 Indoor Soccer Registration Form
ALL DIVISIONS $50.00

PERSONAL INFORMATION

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *Province* *Postal Code*

Home Phone: ( ) _____ Business Phone: ( ) _____

Cell Number: _____ E-mail Address: _____

Birth Date: (y/m/d) _____ OSA Registrant # _____ Gender: _____

OHIP # (Optional): _____ **OHIP Numbers are optional to collect and an optional field for this form**

PLAYING HISTORY

ATTENTION: The "PLAYING HISTORY" section MUST be completed – Any person who provides false information or withholds any of the required information will be suspended from all Ontario Soccer Association activities for one year.

Has the player **ever** registered to play soccer in another country? ___ Yes ___ NO

If Yes, answer the following questions:

a) In which country (other than Canada) did the player **last** register? _____
b) With which Club did the player **last** register in another country? _____
c) In which year did the player **last** register in another country? _____

CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Canadian Soccer Association, Ontario Soccer Association, Huronia District Soccer Association, Simcoe County Youth Soccer League and Parry Sound Soccer Club to collect and use personal information about my child/ward for the purpose of receiving communications from the Canadian Soccer Association, Ontario Soccer Association, District Association, League and Club.

I understand that I may withdraw such consent related to receiving communications at any time by contacting the OSA Privacy Officer at **OSAPrivacyOfficer@soccer.on.ca** or by mail to: **Attention: OSA Privacy Officer, Ontario Soccer Association, 7601 Martin Grove Road, Vaughan ON L4L 9E4**. The Privacy Officer will advise the implications of such withdrawal.

We do not sell or distribute your personal information to any other third party not listed herein.

ACCEPTANCE OF TERMS AND CONDITIONS

In consideration of the acceptance of my child/ward's membership in the Ontario Soccer Association, District Association and Club, I, the parent/guardian (for the participant under 18 years of age), agree as follows:

1. I understand that my child/ward cannot play in any sanctioned soccer game until after this registration form has been validated and the registration data has been entered in The Ontario Soccer Association's computerized registration system.
2. I have reviewed the participation agreement attached and my signature affixed hereto indicates my agreement with such participation agreement.
3. I am aware of The Ontario Soccer Association, Huronia District Soccer Association, Simcoe County Youth Soccer League and Parry Sound Soccer Club bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
4. I accept sole responsibility for my child/ward's personal possessions and athletic equipment.
5. I accept all liability for any damage to the playing equipment caused by my child/ward's careless, negligent and/or improper handling.

By signing and dating below, you agree that you are the parent or legal guardian of the player being registered and to be bound by this Legal Agreement even if you have not read the agreement

_____ _____
Signature of Parent/Guardian Date

For use by CLUB REGISTRAR

Verification of Birthdate: __ Birth Certificate ___ Player Book ___ Other

SIGNATURE_____

Date _____

For use by CLUB REGISTRAR

Amount $_____

Cash_____ **Cheque Number**_____ **Initial**_____

Date_____ **Receipt #** _____

Note: Club must retain copy of the player registration form and if requested must submit form to its District Association or the Ontario Soccer Association upon request

ONTARIO SOCCER ASSOCIATION
PARTICIPATION AGREEMENT

FOR THOSE UNDER 18 YRS

By signing this document you will waive certain legal rights, PLEASE READ CAREFULLY.

Name of Participant: _____ Date of Birth _____/_____/_____Age as of Dec 31st, 2010 _____
y m d

IN CONSIDERATION of allowing my minor child/ward to participate in the programs, activities and events of The Ontario Soccer Association, **I ASSURE TO YOU THAT:**

1. I am the parent/guardian of the above named participant having full legal responsibility for decisions regarding the above named participant.
2. I believe that my child/ward is physically, emotionally and mentally able to participate in the programs, activities and events of The Ontario Soccer Association.
3. I hereby acknowledge that I am aware of the risks and hazards associated with or related to soccer. The risks and hazards include, but are not limited to injuries from:

   a. Executing strenuous and demanding physical techniques in soccer;
   b. Dryland training including weights, running and massage;
   c. Grass, turf and other surfaces including bacterial infections and rashes;
   d. Falls to the ground due to uneven or irregular terrain or surfaces;
   e. Collisions with walls and soccer equipment;
   f. Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
   g. Extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
   h. Contact, colliding or being struck by other participants, spectators, equipment or vehicles;
   i. Vigorous physical exertion and strenuous cardiovascular workouts;
   j. Exerting and stretching various muscle groups; and
   k. Travel to and from competitive events and associated non-competitive events which are an integral part of the organization's activities.

4. Furthermore, I am aware that my child/ward may:

   a. Sustain injuries in soccer that can be severe, cause spinal cord injuries and even be fatal;
   b. Experience anxiety while challenging himself/herself during the activities, events and programs;
   c. Come into close contact with other participants, including the possibility of accidental and unexpected contact;
   d. Risk of injury is reduced if he/she follows all rules established for participation; and
   e. Risk of injury increases as he/she become fatigued.

I UNDERSTAND AND AGREE, on behalf of myself, my heirs, assigns, personal representatives and next of kin that my signing of this document constitutes:

5. I am registering my child/ward willingly and my child/ward is participating voluntarily in these activities, events and programs.
6. I agree that there are risks in soccer as described above and my child/ward will be exposed to these risks and hazards.
7. I agree to accept all these risks and hazards and be responsible for any injury or other loss which my minor child/ward might receive while participating in these events, activities and programs.
8. If something happens to my child/ward, I release the Organizers of responsibility for any claims, demands, actions and costs which might arise out of my child/ward's participation. I understand "Organizers" to mean: The Ontario Soccer Association, District Associations, Leagues, Clubs and their directors, officers, members, employees, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities, and representatives.

Accident Insurance

Executing this agreement will not preclude you from accident insurance coverage, subject to the terms and conditions of The Ontario Soccer Association's insurance policy.

I ACKNOWLEDGE MAKING THIS AGREEMENT

By signing and dating below, you agree that you are the parent or legal guardian of the player being registered and to be bound by this Legal Agreement even if you have not read the agreement

_____	_____	_____
Printed Name of Parent or Guardian	Signature of Parent or Guardian	Date
_____	_____	_____
Printed Name of Parent or Guardian	Signature of Parent or Guardian	Date