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REGISTRATION FORM



Personal Information

Full Name: _____
Last First Middle

Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Home Phone: (____) _____ Sex: ☐ Male ☐ Female

Bus. Phone: (____) _____ Date of Birth: _____
Year Month Day

Cell Phone: (____) _____ Proof of age: ☐ Birth Certificate ☐ Old Card ☐ Other

Fax Number: (____) _____ OSA Registrant Number: _____

E-mail Address: _____ OHIP Number (Optional): _____

Emergency Contact Information

Name: _____ Relationship: _____
Last First

Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Daytime Phone: (____) _____ Evening Phone: (____) _____

Team Details

Season Type and Player Classification: ☐ Indoor: ☐ MI ☐ YI ☐ SI ☐ PI
☐ Outdoor: ☐ MO ☐ YC ☐ SC ☐ PR ☐ YR ☐ SR ☐ 5A

Club Name: _____ Registration Number: **CD** - ____ - ____

Team Name: _____ Registration Number: **TD** - ____ - ____

League Name: _____ Registration Number: **L** - ____ - ____

Division Name: _____ Registration Number: **D** - ____ - ____

Playing History

WARNING: This 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.

_____ *With which Club did the player last register in?*

_____ *In which province and country did the player last register?*

_____ ☐ Indoor ☐ Outdoor *In which year?*

Has the player **ever** registered to play soccer in another country?
☐ No ☐ Yes If Yes, answer the following questions:

_____ *In which country (other than Canada) did you last register?*

_____ *With which Club did last register in another country?*

_____ *In which year did you last register in another country?*

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Consent for Use of Personal Information

I authorize The Ontario Soccer Association to collect and use personal information about ☐ me ☐ my child/ward, including name, address, e-mail address, telephone number, cell phone number, sex, age, date of birth, health card number (optional), medical history (optional) and any other additional information required by the Club for its own needs for the following purposes:

- a) Receiving communications from The Ontario Soccer Association;
- b) Receiving information from The Ontario Soccer Association's sponsors;
- c) Ensuring appropriate age group and category;
- d) Determining eligibility;
- e) Media relations and publishing sports information;
- f) In the case of medical emergencies;
- g) Determining membership demographics and program wants and needs;
- h) Player Identification/Recruitment; and
- i) Posting rosters, statistics, images and results on website of The Ontario Soccer Association

I also authorize The Ontario Soccer Association to disclose ☐ my ☐ my child's/ward's personal Information to the Canadian Soccer Association, District Association, Leagues and Tournament Host Organizations for the purpose of annual demographic reporting, registration, posting competition information, organizational needs and to communicate with registrants about soccer programs, events and activities; ITSportsnet; and third party agent to solely facilitate direct mailings from The Ontario Soccer Association.

I consent to The Ontario Soccer Association to take photographs, videotape, or digital recordings of ☐ me ☐ my child/ward and to use these in any and all media, including The Ontario Soccer Association's Web site.

I understand that I may withdraw consent to the collection, use or disclosure of my personal information at any time by contacting The Ontario Soccer Association's Privacy Officer at 905 264 9390 or email at OSAPrivacyOfficer@soccer.on.ca

I, _____, of the City of _____ and Province of Ontario, am fully informed as to the contents of this consent and understand the full import of powers to The Ontario Soccer Association, solemnly declare that I am of legal age and have authority and capacity to bind myself my child/ward and have executed this consent voluntarily.

Signature

Date

Acceptance of Terms and Conditions

In consideration of the acceptance of my membership in The Ontario Soccer Association, I, the participant and parent/guardian if under 18, agree as follows:

1. **I understand that I cannot play in any sanctioned soccer game until 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 waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement.
3. To abide by the published rules of The Ontario Soccer Association, the Essex County Soccer Association, my League, and my Club.
4. I am aware of The Ontario Soccer Association's and ECSA's published rules and agree to be bound by them.
5. I am sole responsibility for my/child/ward personal possessions and athletic equipment.
6. I accept liability for any damage to the playing equipment caused by my careless, negligent and/or improper handling.

I hereby accept the terms and conditions as described above. (Initial) _____

Acknowledgement

I acknowledge that I have read this registration agreement in its entirety and that I have executed this registration agreement voluntarily.

Name of Participant

Signature of Participant

Witness

Date

Signature of Parent /Guardian (if under 18)

Witness

Date

PLAYER

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REGISTRATION FORM



Waiver/Participation Agreement

ONTARIO SOCCER ASSOCIATION

Name of Participant: _____ Age (If under 18) _____

ALL SPORT, INCLUDING SOCCER, HAS ITS RISKS

I participate in the sport of soccer because it is physically and mentally challenging. In consideration of my participation in such programs, activities and events, I hereby acknowledge that I am aware of the risks and hazards associated with or related to soccer. The risks and hazards of soccer include, but are not limited to:

Injuries from executing strenuous and demanding physical techniques in soccer;
Injuries from training including weights, running, and massage;
Injuries from grass, turf and other surfaces including bacterial infections and rashes;
Injuries resulting from falls to the ground due to uneven or irregular terrain or surfaces;
Injuries from collisions with walls and soccer equipment;
Injuries resulting from failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
Spinal cord injuries which may render me permanently paralyzed;
Injuries from extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
Injuries from contact, colliding or being struck by other participants, spectators, equipment or vehicles;
Injuries resulting from vigorous physical exertion and strenuous cardiovascular workouts;
Injuries from exerting and stretching various muscle groups; and
Travel to and from competitive events and associated non-competitive events which are an integral part of the organization's activities.

Furthermore, I am aware:

That injuries sustained in soccer can be severe;
That I may come into close contact with other participants, including the possibility of accidental and unexpected touching;
That I may experience anxiety while challenging myself during the activities;
That my risk of injury is reduced if I follow all rules established for participation; and
That my risk of injury increases as I become fatigued.

I AGREE TO BE RESPONSIBLE FOR MYSELF

I am participating voluntarily in these activities, events and programs. I agree that there are risks in soccer as described above. By participating voluntarily in these events, activities and programs, I am exposed to these risks and hazards. I agree to accept them and be responsible for any injury or other loss which I might receive while participating in these events, activities and programs.

If something happens to me, I release the organizers of responsibility for any claims, demands, actions and costs which might arise out of my participation. In this Agreement I understand "organizers" to mean: Ontario Soccer Association and Essex County Soccer Association, its directors, officers, members, employees, volunteers, officials, participants, League, Clubs, agents, sponsors, owners/operators of the facility, and representatives.

I ACKNOWLEDGE MAKING THIS AGREEMENT

I have read and understood the terms and conditions of this agreement, and by signing it voluntarily, I am agreeing to abide by these terms.

Printed Name of Participant

Signature of Participant

Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date