

## Orillia, Ont. L3V 6K7

## www.ramarasoccerclub.ca

## 2018 ADULT HOUSE LEAGUE REGISTRATION FORM

Contacts: Drew 705-826-0322 Jana 705-484-1035; Sandra 705-689-2240; Suzy 705-327-1468

Date of Birth	
Dute of Diffin	Day Month Year
Name of Participant:	Male Female
Address:	
Address:        Phone #	<del></del> ,
Email:	<del></del>
Preferred playing position:	
Email: Preferred playing position:  Jersey Size: Health Concerns:	
Emergency contact name/number:	
OUR LEAGUE RELIES ON VOLUNTEERS  Coach Assist Coach Peferon Field Maintenance	
Coach, Assist Coach, Referee, Field Maintenance Consent for Use of Personal Info	
I authorize the Ontario Soccer Association, Huronia District Soccer and Ramara	
about me or my child/ward for the purpose of receiving communications from the	
Association, League and Club.	- C
I understand I may withdraw consent to collection, use, disclosure of my or my c	hild/ward's personal information at any time by
contacting the OSA Privacy officer at OSAPrivacyOfficer@soccer.on.ca or by m	nail to: Attention of the OSA Privacy Officer, The
Ontario Soccer Association, 7601 Martin Grove Road, Vaughan ON L4L 9E4.	
*We do not sell or distribute your personal information to any third party not liste	
Acceptance of Terms and Cond	
In consideration of the acceptance of my membership in the Ontario Soccer Association, I parent/guardian (if participant is under 18 years of age), agree as follows:	District Association and Club, I, the participant and
1. I understand that I or my child/ward cannot play in any sanctioned soccer game until af	ter this registration form has been validated and the
registration data has been entered in the Ontario Soccer Association's computerized regist	tration system.
2. I have reviewed the waiver/participant agreement attached and my signature affixed her	reto indicates my agreement with such waiver/participation
agreement.	C Club and I balance malicies males and
3. I am aware of The Ontario Soccer Association, Huronia District Soccer Association, Raregulations and agree to abide by them and to be bound by them.	amara Soccer Club and League bylaws, policies, rules and
4. I accept sole responsibility for my or my child/ward's personal possessions and athletic	equipment.
5. I accept all liability for any damage to the playing equipment caused by me or my child	/ward's careless, negligent and/or improper handling.
I acknowledge that I have read this registration agreement in its entirety and that I have ex	secuted this registration agreement voluntarily.
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PLEASE TAKE NOTE: Shin pads must be worn. Cleats are recommended.	
Adult House League Fee \$100.00 each; Late fee \$25.00 after March 2	1st
NSF charges will apply for returned cheques.	<del></del>
Refunds will be given, less \$20.00 administration fee.	
Requests to be made at the time of registration - no guarantees. Bala	ancing teams will be priority.
Cimpeture	
Signature: Date	ed:
FOR OFFICE USE ONLY: Player's OSA#	
Paid by: CashChequeOtherInterac Email Transfer	Total \$
Received by:DiscountReceipt	
Checked for missing information on registration form Code of Conduct	completed