Orillia, Ont. L3V 6K7

www.ramarasoccerclub.ca

2020 **HOUSE LEAGUE** REGISTRATION FORM

Contacts: Jana 705-484-1035; Sandra 705-689-2240; Sue 705-326-3611; Suzy 705-327-1468

	Date of Birth//
	Day Month Year
Name of Participant:	Male Female
Address:	
Postal Code: Phone #	
Parents/Guardians name:	
Email:	
Health Concerns:	How many years have you played?
Please indicate uniform size preference if	alternate sizing is required
Do you want siblings of same age group to	be on the same team? YesNo
	egistration - no guarantees. Balancing teams will be priority.
	(\$10.00 discount for coaching/assist coaching) Would you be willing to:
	e, Field Maintenance, Other
	nsent for Use of Personal Information
	Soccer, the applicable District Association and Soccer Organization to collect and use
	ving communications from the Canadian Soccer Association, Ontario Soccer, District
Association, League and Soccer Organization. I under	stand that I may withdraw such consent related to receiving communications at any time by
	cy@ontariosoccer.ca or by mail to: Attention: Privacy Officer, Ontario Soccer, 7601 Martin
Grove Road, Vaughan ON L4L 9E4. The Privacy Offi	
	your personal information to any other third party not listed herein.*
	ecceptance of Terms and Conditions vard's membership in the Ontario Soccer, District Association and Club/Academy, I, the
participant, agree as follows:	value's inclinocistisp in the Ontario Socces, District Association and Cito/Academy, 1, the
	er game until after this registration form has been validated and the registration data has
been entered in Ontario Soccer's computerized registra	
	signature affixed hereto indicates my agreement with such waiver.
	l Club and League bylaws, policies, rules and regulations and agree to abide by
them and to be bound by them.	
	s and athletic equipment and accept all liability for any damage to the playing equipment
caused by my careless, negligent and/or improper hand	nd/or record my image and/or voice on still or motion picture film and/or audio tape and to
	e Organizations through the media of newsletters, websites, television, film, radio, print
	emuneration for use of audio/visual materials used for these purposes.
	e player being registered and to be bound by this Legal Agreement even if you have not read
this agreement.	
Children must be turning 4 years old in 20	
Shin pads must be worn. Cleats are recor	amended.
TIMBITS Fee \$80.00 (2016 Birth Year)	
HOUSE LEAGUE Fee \$105.00 each; Late	e fee \$25.00 after March 21st.
Family fee reduction for 3 or more player	s (\$10.00 less for each participant).
	ues. Refunds will be given, less \$20.00 administration fee.
THE STATE OF THE S	
Signature:	Dated:
FOR OFFICE USE ONLY: Player's OSA#	
Paid by: Cash Cheque Other	Interac Email Transfer Total \$
	Receipt
	on form Rirth certificate checked (new players only)

ONTARIO SOCCER PARTICIPANT'S AGREEMENT

(To be used by players under the age of 18)

Name of Participant:	Age of Participant:
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ALL PROGRAMS AND ACTIVITIES HAS ITS RISKS

I participate in the game 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 this activity. The risks and hazards include, but are not limited to:

- · Injuries from executing strenuous and demanding physical techniques in soccer;
- Injuries from dryland training including weights, running and massage;
- · Injuries from grass, turf and other surfaces including bacterial infections and rashes
- · 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 experience anxiety while challenging myself during the activities;
- That I may come into close contact with other participants, including the possibility of accidental and unexpected contact;
- . 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, District Associations, Leagues, Clubs and their directors, officers, members, employees, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities and representative.

INCLIDANCE

Executing this agreement may not preclude you from insurance coverage.

I ACKNOWLEDGE MAKING THIS AGREEMENT

I have read and underst	tood the terms and conditi	ions of this agreement, and	d by signing it voluntarily, I	I am agreeing to
abide by these terms.				
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Signature of Participant (if over 13)	Signature of Parent/Guardian	Date



