

# CNEU INDOOR 2025-26

## SOCCER REGISTRATION FORM



PLAYER First Name:			PLAYER Last Name:		
Date of Birth: DAY	MONTH	YEAR	Male		Female
Home Address:					
Email Address:				Postal Code:	
Player ID # (If Any)			Club/Age Group/Tier:		
PARENT 1	NAME		PHONE		
PARENT 2	NAME		PHONE		
EMERGENCY	NAME		PHONE		
DAYS OF CONFLICTS WITH OTHER PROGRAMS:					

### Program Offer and Fees:

INDOOR FEES TBA. CNEU offers DEFINED program. Your registration fees will cover CMSA per player Fees, Facility Rental for training, Coaches salaries, Uniform, equipment and more. Registration Fee will cover Seasonal practices and CMSA games as defined on CNEU website (cneu.ca) under program information.

### Refund Policy:

**Anyone removed for violation of codes of conduct will receive NO refund. There will be NO refund after the team roster submission deadline. Refund will be based on season ending injury with doctor's Note. All Refunds will be Prorated on CNEU portion. CMSA portion is NON-REFUNDABLE.**

### Waiver and Privacy Release, minor player authorization and consent

The parent and/or guardian understands and accept the liability and risk associated with soccer as a contact sport and release Calgary Northeast United FC from any claim, demands, damages, loss, injury or damage to the player may incur while participating in any CNEU game or practice. The parent and/or guardian consent to CNEU collecting, using and disclosing the player registration information for all soccer participation registration requirements including, but not limited to, CMSA, ASA, CSA and provincial affiliated associations.

I as a guardian of the above-mentioned player, hereby authorize to play for CNEU and consent to abide by the club's policies, code of conducts and publishing the child's image on club's media if necessary. Binding when signed.

**There are benefits of being a coach or manager of your child's team. \*Ask for more information\***

Are You willing to Volunteer as a Coach/Team Manager/ Field Martial? No: Yes:

Payment Method	Cash	Cheque	Card	E-transfer	Subsidy
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I HAVE READ CNEU/CMSA CODE OF CONDUCT AND CONFIRM TO COMPLY	Signature
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Parent's Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Club Representative:**

**Signature:**

**99 SADDLEBROOK WAY NE, CALGARY AB T3J 5M8 @ [INFO@CNEU.CA](mailto:INFO@CNEU.CA) 403 585 7500 CNEU.CA**