

IBSA SOCCER REGISTRATION 2019

Player's name _____ Date of Birth _____

Parent's name(s) _____ Email _____

Mailing Address _____ Postal Code _____

Physical Address _____

Home Phone _____ Cell Phone _____

AHC No _____ Emergency Contact _____

Shirt size _____ Shoe size (U7 and above) _____ Short size (U7 and above) _____

Please also complete waiver portion of form on second page.

U5	Born in 2014	\$ 60	_____	Jersey Deposit \$50	_____
U7	Born in 2012 or 2013	\$ 70	_____	Jersey Deposit \$50	_____
U9	Born in 2010 or 2011	\$ 90	_____	Jersey Deposit \$50	_____
U11	Born in 2008 or 2009	\$ 90	_____	Jersey Deposit \$50	_____
U13	Born in 2006 or 2007	\$ 95	_____	Jersey Deposit \$50	_____
U15	Born in 2004 or 2005	\$ 95	_____	Jersey Deposit \$50	_____
U17	Born in 2002 or 2003	\$ 95	_____	Jersey Deposit \$50	_____
U19	Born in 2000 or 2001	\$ 95	_____	Jersey Deposit \$50	_____

Please make cheques payable to : IBSA or Irricana Beiseker Soccer Association

SOCCER NEEDS YOU!!

The IBSA program relies on parent volunteers to make a successful season.

What will you help with? Choose to help in the following areas by leaving your name and telephone numbers.

Please note : Teams will be canceled if no coaches are available.

Coach _____
Assistant Coach _____
Team Manager _____
Board Member _____
Ref Coordinator _____
Fund Raising _____
Equipment Manager _____
Referee _____

-----OFFICE USE ONLY -----

Registration Paid in Full by: Cheque # _____ Cash

Uniform Deposit Paid by: Cheque # _____ Cash

Payment received by : _____ Date : _____

PLAYER WAIVER & PRIVACY RELEASE

FOR THE 2019 SOCCER SEASON

I, _____ will not hold the Irricana-Beiseker Soccer Association, its coaches, assistant coaches or executive nor the Town of Irricana or the Village of Beiseker responsible for any injuries or loss incurred while my child is participating in the supervised practice or game of Soccer.

In the event of injury, I hereby authorize IBSA to obtain medical advice and or transportation as deemed necessary.

In signing below I, the parent or guardian of the before mentioned minor, acknowledge the information held on this registration form as true and correct.

As well, this consent permits the disclosure of personal information to the ASA, CSA and provincial affiliated bodies.

Signature _____ Date _____

Photography Waiver

I _____ hereby consent to have
_____ (child's name) photographs used to help
promote soccer and to be used on the IBSA web page.

Signature _____ Date _____