



EDMONTON FIJI SPORTS ASSOCIATION

PLAYER REGISTRATION & WAIVER FORM

2026 SEASON

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT

PLAYER INFORMATION

Player Name:	Date of Birth:	Gender:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address:	City:	
<input type="text"/>	<input type="text"/>	
Province:	Postal Code:	Phone:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email:	Team Name:	
<input type="text"/>	<input type="text"/>	

EMERGENCY CONTACT

Contact Name:	Relationship:	Phone:
<input type="text"/>	<input type="text"/>	<input type="text"/>

By signing this document, you are waiving certain legal rights including the right to sue. Please read carefully.

I, the undersigned, on behalf of myself, my heirs, successors and assignors, HEREBY REMISE, RELEASE, INDEMNIFY, DISCHARGE AND FOREVER HOLD HARMLESS the Edmonton Fiji Sports Association ("the Association"), the City of Edmonton ("the City"), and the association(s)/league(s) organizing the game or event, their directors, employees, volunteers, coaches, instructors, agents and independent contractors and their heirs, successors and assignors from any claims whatsoever arising by reason of any disease, deterioration of health, illness or injury to any person, including death, or for damage to, or loss of any of my property resulting from or arising from use of the lands and premises, from being present on the lands and premises, from participation in any program, from the use of any facilities or equipment located on the lands and premises, from acceptance of the advice of, or from the negligence of the Association, the City and the association(s)/league(s) organizing the game or event, their directors, employees, volunteers, coaches, instructors, agents, independent contractors or any other persons using the lands and premises.

I HAVE READ AND UNDERSTAND THIS AGREEMENT:

- I am 18 years of age or older
- I am the parent/guardian of a minor player and consent to their participation

SIGNATURES

DATED at the City of Edmonton, in the Province of Alberta, this

<input type="text"/>	<input type="text"/>	<input type="text"/>
day of	month	year

Player/Parent Full Name (print):

Date:

Player/Parent Signature:

Date:

Coach/Manager Signature:

Date:

EFSA OFFICIAL USE

President Signature:

Date:

Secretary Signature:

Date:

Date Approved: