

ASANTE SOCCER ACADEMY

415 Oakdale Road, Unit 216. Toronto, ON. M3N 1W7 Tel: (647) 881-9179 www.asanteacademy.com

2022 Development Program Registration Form (U7-U14)

DIVISION

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Player's Last Name	First Name			yr	
Address			_ Apt#		
City:	Postal Code:				
Home Tel: ()	Bus Tel: ()			
Email (print clearly):					
Health Card #	Medical Conditions / Allergies (p	olease specify	<u>')</u>		
club and I agree to hold harmless Asar all injuries sustained while playing for t soccer shoes and shin pads to be w of Asante Soccer Academy, the Ontario my child being publicized, filmed, audio	derstand that there is a potential for injury whate Soccer Academy (ASA), The Team, Official this ASA at practice, games or events. For saworn at all times during play and practice of Soccer Association (www.soccer.on.ca) and to taped, photographed, interviewed by employed by the Ontario Soccer Association and I and reverse side of this form.	als, League, or D afety reason I ag ces. I agree to a the North York b byees, agents or	istrict Associ gree to supplied by the Soccer Associ servents of A	ations from the ply my control of the ply my	om any and child with d regulations consent to ave read and
A \$40.00 NSF Fee will be charged for a WINTER SESSIONS (Oct 9, 2022 - Dec 18, 2022 \$245 for 11 w (Uniform is not inc)	2 (SUNDAYS) eeks	I	LOCATION HE HANGA	·R	ON
Parent / Guardian Name	 Parent / Guardian Signatu	ire	Date		
How did you hear about us? Fr Would you like to volunteer?	riend □ School □ Street Sign □ YES □ NO □] Intern [
	EARLY BIR	2D			

EARLY BIRD REGISTRATION \$195.00

REGISTER BEFORE SEP 24, 2022