

**PARRY SOUND SOCCER CLUB**

PO Box 271 Parry Sound ON P2A 2X4

Year of Birth \_\_\_\_\_

**PSSC Registration Form – Under 18 – Outdoor House League 2018**

Full Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City Province Postal Code

Home Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_

Cell Number: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Birth Date: (y/m/d) \_\_\_\_\_ OSA Registrant # \_\_\_\_\_ Gender: \_\_\_\_\_

Preferred Playing Position (not always available) \_\_\_\_\_ Are you willing to play Goal? \_\_\_\_\_

**PLAYING HISTORY**

**ATTENTION: The "PLAYING HISTORY" section MUST be completed** – Any person who provides false information or withholds any of the required information will be suspended from all Ontario Soccer Association activities for one year.

Has the player **ever** registered to play soccer in another country? \_\_\_ Yes \_\_\_ NO

If Yes, answer the following questions:

- a) In which country (other than Canada) did the player **last** register? \_\_\_\_\_
- b) With which Club did the player **last** register in another country? \_\_\_\_\_
- c) In which year did the player **last** register in another country? \_\_\_\_\_

**CONSENT FOR USE OF PERSONAL INFORMATION**

I authorize the Canadian Soccer Association, Ontario Soccer Association, Huronia District Soccer Association, Huronia District Soccer League and the Parry Sound Soccer Club to collect and use personal information about my child/ward for the purpose of receiving communications from the Canadian Soccer Association, Ontario Soccer Association, District Association, League and Club, including photos for advertising and promotions.

I understand that I may withdraw such consent related to receiving communications at any time by contacting the OSA Privacy Officer at **OSAPrivacyOfficer@soccer.on.ca** or by mail to: **Attention: OSA Privacy Officer, Ontario Soccer Association, 7601 Martin Grove Road, Vaughan ON L4L 9E4**. The Privacy Officer will advise the implications of such withdrawal.

**\*We do not sell or distribute your personal information to any other third party not listed herein.\***

**ACCEPTANCE OF TERMS AND CONDITIONS**

In consideration of the acceptance of my child/ward's membership in the Ontario Soccer Association, District Association and Club, I, the parent/guardian (for the participant under 18 years of age), agree as follows:

1. I understand that my child/ward cannot play in any sanctioned soccer game until after this registration form has been validated and the registration data has been entered in The Ontario Soccer Association's computerized registration system.
2. I have reviewed the participation agreement attached and my signature affixed hereto indicates my agreement with such participation agreement.
3. I am aware of The Ontario Soccer Association, Huronia District Soccer Association, Huronia District Soccer League and Parry Sound Soccer Club bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
4. I accept sole responsibility for my child/ward's personal possessions and athletic equipment.
5. I accept all liability for any damage to the playing equipment caused by my child/ward's careless, negligent and/or improper handling.

By signing and dating below, you agree that you are the parent or legal guardian of the player being registered and to be bound by this Legal Agreement even if you have not read the agreement

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**For use by CLUB REGISTRAR**

Verification of Birthdate: \_\_\_ Birth Certificate \_\_\_ Player Book \_\_\_ Other

SIGNATURE \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Y M D

For use by Club Registrar. Receipt # \_\_\_\_\_

Cash \$ \_\_\_\_\_ Chq \$ \_\_\_\_\_ Chq # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Initial \_\_\_\_\_  
Y M D

**Registration Fees must be received by March 20<sup>th</sup> 11:59pm for early bird rates and April 30<sup>th</sup> 11:59pm for regular rates**

	U4-U6	U8-U16	Adult
Early Bird Registration Fee (Received Feb 15 <sup>th</sup> to March 20 <sup>th</sup> )	\$60	\$85	\$100
Regular Registration Fee (Received March 21 <sup>st</sup> to April 30 <sup>th</sup> )	\$85	\$110	\$125
Late Registration Fee (Received May 1 <sup>st</sup> to May 30 <sup>th</sup> )	\$110	\$135	\$150

**\*\* Late registration is subject to availability**

**Note: Club must retain copy of the player registration form and if requested must submit form to its District Association or the Ontario Soccer Association upon request**

**ONTARIO SOCCER ASSOCIATION  
PARTICIPANT'S AGREEMENT  
(To be used for Players under the Age of 18)**

Name of Participant: \_\_\_\_\_ Age (If under 18) \_\_\_\_\_

**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: The Ontario Soccer Association, District Associations, Leagues, Clubs and their directors, officers, members, employees, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities and representative.

**INSURANCE**

Executing this agreement may not preclude you from insurance coverage.

**I ACKNOWLEDGE MAKING THIS AGREEMENT**

I have read and understood the terms and conditions of this agreement, and by signing it voluntarily, I am agreeing to abide by these terms.

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant (if over the age of 13)

\_\_\_\_\_  
Signature of Parent /Guardian

\_\_\_\_\_  
Date