



SAULT YOUTH SOCCER CLUB AND LEAGUE

316 Elizabeth Street, Sault Ste. Marie, Ontario P6A 6J3

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SYSCL WEBSITE – <http://www.saultyouthsoccer.com/>

COMPETITIVE PLAYER REGISTRATION FORM INDOOR 2018-2019

Fill out complete form. Print Clearly. Make **cheques or money orders** payable to **Sault Youth Soccer Club (S.Y.S.C.)**
CASH WILL NOT BE ACCEPTED. Mail or drop off your form at the above address.

Family Name _____ First Name _____

Street Address _____ Apt. No. _____ City _____

Province ON Postal Code _____ Phone- Home (705) _____ Cell: _____

Work (705) _____

E-mail address _____

Birth Date (Year) _____ (Month) _____ (Day) _____ Male [] Female []

(COPY OF BIRTH CERTIFICATE REQUIRED FOR NEW REGISTRANTS ONLY)

NOTE: HAS THE ABOVE ADDRESS OR PHONE NUMBER CHANGED FROM LAST SEASON Yes [] No []

Are you currently a **CIVICS PLAYER** Yes [] If Yes please indicate Coaches Name _____

Youth Soccer Indoor- FEE \$220.00

Playing History

WARNING: This 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.

With which Club did the player last register? _____

In which country did the player last register? _____

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 you last register? _____

b) With which Club did last register in another country? _____

c) In which year did you last register in another country? _____

****YOU MUST COMPLETE AND SIGN ALL SECTIONS ON THE REVERSE TO BE ACCEPTED FOR REGISTRATION.****

(For Office Use Only) F _____ HP _____ A _____ O _____ P [] N [] U []

Sault Youth Soccer League Player Registration Form (Page 2)

Consent for Use of Personal Information

I authorize Ontario Soccer to collect and use personal information about me/ my child/ward, including name, address, email, telephone number, cell phone number, sex, age, date of birth, health card number (optional), medical history (optional) and any other additional information required by the Club for its own needs for the following purposes:

- a) Receiving communications from Ontario Soccer ;
- b) Receiving information from Ontario Soccer sponsors;
- c) Ensuring appropriate age group and category;
- d) Determining eligibility;
- e) Media relations and publishing sports information;
- f) In the case of medical emergencies;
- g) Determining membership demographics and program wants and needs;
- h) Player Identification/Recruitment; and
- i) Posting rosters, statistics, images and results on website of Ontario Soccer/SYSCl
- j) disclosure of my or my child/ward's name and address to the City of Sault Ste. Marie for the purpose of securing fields and no other purpose.

I also authorize Ontario Soccer to disclose my child's/ward's personal information to Canadian Soccer , SYSCl, Leagues and Tournament Host Organizations for the purpose of annual demographic reporting, registration, posting competition information, organizational needs and to communicate with registrants about soccer programs, events and activities; and third party agent to solely facilitate direct mailings from The OS.

I consent to Ontario Soccer /SYSCl to take photographs, videotape, or digital recordings of me or my child/ward and to use these in any and all media, including Ontario Soccer /SYSCl website.

I understand that I may withdraw consent to the collection, use or disclosure of my personal information at any time by contacting Ontario Soccer Privacy Officer at 905 264 9390 or email at OSprivacyOfficer@soccer.on.ca

Acceptance of Terms and Conditions

In consideration of the acceptance of my membership in Ontario Soccer, I, the participant, parent/guardian if under 18, agree as follows:

1. I understand that I cannot play in any sanctioned soccer game until this registration form has been validated and the registration data has been entered in Ontario Soccer computerized registration system.
2. I have reviewed the waiver/participation agreement and my signature affixed hereto indicates my agreement with such waiver/ participation agreement.
3. To abide by the published rules of OS, The SYSCl (my League, and my Club)
4. I am aware of Ontario Soccer published rules and agree to be bound by them.
5. I am sole responsibility for my/child/ward personal possessions and athletic equipment.
6. I accept liability for any damage to the playing equipment caused by my careless, negligent and/or improper handling.

Waiver/Participation Agreement

ALL SPORT, INCLUDING SOCCER, HAS ITS RISKS

I participate in the sport 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 soccer. The risks and hazards of soccer include, but are not limited to:

- Injuries from executing strenuous and demanding physical techniques in soccer;
- Injuries from training including weights, running, and massage;
- Injuries from grass, turf and other surfaces including bacterial infections and rashes;
- Injuries resulting from falls to the ground due to uneven or irregular terrain or surfaces;
- 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 come into close contact with other participants, including the possibility of accidental and unexpected touching.
- That I may experience anxiety while challenging myself during the activities;
- 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: Ontario Soccer Association, its directors, officers, members, employees, volunteers, officials, participants, District Association, League, Clubs, agents, sponsors, owners/operators of the facility, and representatives.

Acknowledgement

I acknowledge that I have read this registration agreement in its entirety and that I have executed this registration agreement voluntarily
I hereby accept the Terms and Conditions as described above.

(Initial) _____

I have read and understood the **Waiver and Participation agreement**, and by signing it voluntarily, I am agreeing to abide by these terms

(Initial) _____

I have read and agree to **The Consent for use of Personal Information** statement on behalf of me my child/ward and that I have the legal right to do so.

(Initial) _____

Printed Name of Participant (if over the age of 13) _____

Signature of Participant (if over the age of 13) _____

Printed Name of Parent or Guardian _____

Signature of Parent or Guardian _____

Date _____