

ONTARIO SOCCER ASSOCIATION**Player Registration Form 2020**

U_____

www.markdaleminorsoccer.ca

REGISTRANT INFORMATION

FIRST NAME:	LAST NAME:	
ADDRESS:		
CITY:	PROVINCE:	POSTAL CODE:
PHONE NUMBER:	EMAIL ADDRESS:	
DATE OF BIRTH: (YY/MM/DD)	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	REGISTRATION NUMBER:
REGISTERING AS A:	<input type="checkbox"/> PLAYER <input type="checkbox"/> TEAM OFFICIAL (COACH, MANAGER, ETC.) <input type="checkbox"/> ADMINISTRATOR OR VOLUNTEER	

TEAM / ORGANIZATION DETAILS

ORGANIZATION NAME:	
SEASON TYPE REGISTERING FOR: <input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR <input type="checkbox"/> FUTSAL	
PLAYER CLASSIFICATION:	
INDOOR: <input type="checkbox"/> GRASSROOTS <input type="checkbox"/> YOUTH <input type="checkbox"/> SENIOR	
OUTDOOR: <input type="checkbox"/> GRASSROOTS <input type="checkbox"/> YOUTH REC. <input type="checkbox"/> YOUTH COMP. <input type="checkbox"/> SR. REC. <input type="checkbox"/> SR. COMP.	
TEAM NAME:	LEAGUE NAME:
DIVISION NAME:	

PLAYING HISTORY – FOR PLAYERS ONLYHas the player **ever** registered to play soccer in another country? Yes No

If yes, answer the following questions:

- In which country (other than Canada) did the player last register?
- With which Club did the player last register in another country?
- 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, the applicable District Association and Soccer Organization to collect and use personal information about me for the purpose of receiving communications from the Canadian Soccer Association, Ontario Soccer, District Association, League and Soccer Organization. I understand that I may withdraw such consent related to receiving communications at any time by contacting the Ontario Soccer Privacy Officer at privacy@ontariosoccer.ca or by mail to: Attention: Privacy Officer, Ontario Soccer, 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 or my child/ward's membership in the Ontario Soccer, District Association and Club/Academy, I, the participant, agree as follows:

- I understand that I cannot play in any sanctioned soccer game until after this registration form has been validated and the registration data has been entered in Ontario Soccer's computerized registration system.
- I have read and understand the waiver attached and my signature affixed hereto indicates my agreement with such waiver.
- I am aware of Ontario Soccer, District Association and Club/Academy's and League bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
- I accept sole responsibility for my personal possessions and athletic equipment and accept all liability for any damage to the playing equipment caused by my careless, negligent and/or improper handling.
- I grant permission to the Organization to photograph and/or record my image and/or voice on still or motion picture film and/or audio tape and to use this material to promote the sport of soccer and the Organizations through the media of newsletters, websites, television, film, radio, print and/or other form. I understand I waive any claim to remuneration for use of audio/visual materials used for these purposes.

By signing and dating below you agree that you are the player being registered and to be bound by this Legal Agreement even if you have not read this agreement.

Registrant's Signature or Parent/Legal Guardian if under 18

Date: _____

Name of Parent/Legal Guardian if under 18**DOCUMENTATION HAS BEEN VALIDATED BY ORGANIZATION****DISTRICT ASSOCIATION/ONTARIO SOCCER VALIDATION**

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

Co-Ed Teams

- U4 (2016) \$80
- U6 (2015, 2014) \$80
- U8 (2013, 2012) \$105
- U10 (2011, 2010) \$115

Male & Female Teams

- U12 (2009, 2008) \$125
- U15 (2007, 2006, 2005) \$130
- U18 (2004, 2003, 2002) \$140
- Open Adult (2001 and earlier) \$140

- \$30 Fundraising Fee **OR**
- Participate in Ice Cream Fundraiser

Family Discount: 10% for 3+ registrations

\$40 Late Fee after April 15, 2020

\$20 NSF Fee

****NO REFUNDS AFTER APRIL 15, 2020****

Total Amount Received \$ _____

Date _____ MMS Initial _____

MARKDALE MINOR SOCCER



(To be used by players under the age of 18)

Name of Participant: _____ Age of Participant: _____

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: Ontario Soccer, 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.

Signature of Participant (if over 13)

Signature of Parent/Guardian

Date

Mail Completed Forms & Payment to:

Markdale Minor Soccer c/o Rumi Farmus
PO Box 869
Markdale, ON
NOC 1H0

Online Registration: go to markdaleminorsoccer.ca

Equipment Required for All Players:

Soccer Cleats, Shin Pads, Black Soccer Shorts and Socks.

Shorts and Socks will be available for sale at the beginning of the season.

Team jerseys will be provided.