



Please return both pages of the completed and signed form to:

Mailing Address: P.O. Box 482, Pembroke, ON K8A 6X7

or

Office Location: 170 Ellis Ave (Knights of Columbus Hall), Pembroke

Telephone/Fax: (613) 732-0925

Email: office@pembrokesoccer.com Website: www.pembrokesoccer.com

# Competitive

YEAR: 2008

Player Registration Form – Club #2110

Outdoor  Indoor

## Player Information

OSA #: \_\_\_\_\_ Sex: Male  Female  Birth Date: \_\_\_\_\_  
 (if known) \_\_\_\_\_ YR MO DAY

Full Name: \_\_\_\_\_  
 Last Name \_\_\_\_\_ First Name & Middle Initial \_\_\_\_\_

Address: \_\_\_\_\_  
 Street/P.O. Box/RR# \_\_\_\_\_

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

Home Tel: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Office use only: \*All first time registrants must provide proof of date of birth. Club official must verify and initial the appropriate box. Returning players do not require proof of date of birth.

Birth Certificate	<input type="checkbox"/>	
Health Card	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

## Parent/Guardian Contact Information

<b>Mother (or <input type="checkbox"/> guardian)</b> Full Name: _____ Please provide mailing address below if different from child's: _____ _____ *** I would like to volunteer as: Coach <input type="checkbox"/> Asst. Coach <input type="checkbox"/> Convener <input type="checkbox"/>	<b>Father (or <input type="checkbox"/> guardian)</b> Full Name: _____ Please provide mailing address below if different from child's: _____ _____ *** I would like to volunteer as: Coach <input type="checkbox"/> Asst. Coach <input type="checkbox"/> Convener <input type="checkbox"/>
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## 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.**

Has the player **ever** registered to play soccer in another country? Yes  No   
 If yes, please provide the country, the Club name and the year the player was **last registered in another country** below.

Country: \_\_\_\_\_ Club Name: \_\_\_\_\_ Year: \_\_\_\_\_

## Consent for Use of Personal Information

I authorize The Ontario Soccer Association, Soccer Northeastern Association and the Pembroke 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.

I understand that I may withdraw consent to collection, use or disclosure of my or my child/ward's personal information at any time by contacting the OSA Privacy Officer at [OSAPrivacyOfficer@soccer.on.ca](mailto:OSAPrivacyOfficer@soccer.on.ca) by mail to: **Attention of the OSA Privacy Officer, The Ontario Soccer Association, 7601 Martin Grove Road, Vaughan ON L4L 9E4.**

**\*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's/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, Soccer Northeastern Association, the Pembroke Soccer Club and League 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 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 (if under 18)

Date

**ONTARIO SOCCER ASSOCIATION****PARTICIPATION AGREEMENT***FOR THOSE UNDER 18 YRS***By signing this document you will waive certain legal rights, PLEASE READ CAREFULLY.**

Name of Participant: \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

**IN CONSIDERATION** of allowing my minor child/ward to participate in the programs, activities and events of The Ontario Soccer Association,**I ASSURE TO YOU THAT:**

1. I am the parent/guardian of the above named participant having full legal responsibility for decisions regarding the above named participant.
2. I believe that my minor/ward is physically, emotionally and mentally able to participate in the programs, activities and events of The Ontario Soccer Association.
3. I hereby acknowledge that I am aware of the risks and hazards associated with or related to soccer. The risks and hazards include, but are not limited to injuries from:
  - a. Executing strenuous and demanding physical techniques in soccer;
  - b. Dryland training including weights, running and massage;
  - c. Grass, turf and other surfaces including bacterial infections and rashes;
  - d. Falls to the ground due to uneven or irregular terrain or surfaces;
  - e. Collisions with walls and soccer equipment;
  - f. Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
  - g. Extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
  - h. Contact, colliding or being struck by other participants, spectators, equipment or vehicles;
  - i. Vigorous physical exertion and strenuous cardiovascular workouts;
  - j. Exerting and stretching various muscle groups; and
  - k. Travel to and from competitive events and associated non-competitive events which are an integral part of the organization's activities.
4. Furthermore, I am aware that my child/ward may:
  - a. Sustain injuries in soccer that can be severe, cause spinal cord injuries and even be fatal;
  - b. Experience anxiety while challenging himself/herself during the activities, events and programs;
  - c. Come into close contact with other participants, including the possibility of accidental and unexpected contact;
  - d. Risk of injury is reduced if he/she follows all rules established for participation; and
  - e. Risk of injury increases as he/she become fatigued.

**I UNDERSTAND AND AGREE**, on behalf of myself, my heirs, assigns, personal representatives and next of kin that my signing of this document constitutes:

5. I am registering my child/ward willingly and my child/ward is participating voluntarily in these activities, events and programs.
6. I agree that there are risks in soccer as described above and my child/ward will be exposed to these risks and hazards.
7. I agree to **accept all these risks and hazards** and be responsible for any injury or other loss which my minor child/ward might receive while participating in these events, activities and programs.
8. If something happens to my child/ward, I **release** the Organizers of responsibility for any claims, demands, actions and costs which might arise out of my child/ward's participation. 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 representatives.

**Accident Insurance**

Executing this agreement will not preclude you from accident insurance coverage, subject to the terms and conditions of The Ontario Soccer Association's insurance policy.

**I ACKNOWLEDGE MAKING THIS AGREEMENT**

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.

\_\_\_\_\_  
Printed Name of Parent or Guardian\_\_\_\_\_  
Signature of Parent or Guardian\_\_\_\_\_  
Date**Revised Jan 08**

**ARTICLE 14 – HARASSMENT POLICY**

In registering my child to play soccer under the direction of the Pembroke Soccer Club, I agree as a parent, legal guardian or spectator to abide by Article 14 of the Bylaws of the Pembroke Soccer Club.

Article 14 is the Harassment Policy as published and approved by the Ontario Soccer Association. Harassment is defined as any comment, conduct, or gesture directed toward an individual or group of individuals, which is insulting, humiliating, malicious, degrading, or offensive. It includes, but is not limited to sexual harassment. The Pembroke Soccer Club has adopted this policy in order to protect its' players, coaches, volunteers and referees.

This declaration of compliance to this policy is mandatory.

Name: \_\_\_\_\_

Name of Registered Player(s): \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_