

OTTAWA ST. ANTHONY ITALIA SOCCER CLUB



523 St. Anthony St. (off Preston St.)
 Ottawa, Ontario, Canada K1R 6Z9
www.ottawastanthony.com
 E-mail: info@ottawastanthony.com

2010 Youth Competitive Registration Form

Name: _____ Date of Birth: ____ / ____ / ____

Registration Fee:

Youth Competitive \$395 *

* The Youth competitive package includes Player and Team Registration costs, one (1) set of Uniforms (jersey, short and socks), and registration in the Annual St. Anthony Tournament held on Labour Day weekend.

Please Note: Competitive Registration completed after April 2nd, 2010 will incur a \$40 late fee.

Payment Details

- Payment must be received in full in order for your Registration Form to be processed.
- Make cheque payable to **St. Anthony's Soccer**.
- NSF cheque will be charged an additional \$45 administration fee.

Refunds

- All refund requests are processed in accordance with the Club's refund policy in the Team Administration Guidebook and posted on our website at www.ottawastanthony.com

Family Discount

- See "family discount" rebate on our website or ask team manager for details.
- Rebate form must be submitted by May 28, 2010.

****** Please send the completed registration form to the address shown above along with full payment by cheque payable to St. Anthony's Soccer ******

If you have any questions regarding our soccer program or you require assistance in completing your registration form, please contact the Club at houseleague@ottawastanthony.com or your team manager

OFFICE USE ONLY

Registration Fee Paid\$ _____

Name on Cheque _____

OSA # _____

Date _____

Cash _____ or Cheque # _____

Ottawa St Anthony Italia S.C. 2010 Summer Registration Form

Personal Information

Full Name: _____		
<i>Last</i>	<i>First</i>	<i>Middle</i>
Address: <i>Street Address</i> _____ <i>Apartment/Unit #</i> _____		
<i>City</i> _____	<i>Province</i> _____	<i>Postal Code</i> _____
Home Phone: () _____		Business Phone: () _____
Cell Phone: () _____		Email Address: _____
Birth Date: DD__MM__YYYY _____		Sex: _____
OSA Registrant Number: _____		

Parent or Guardian Information

Full Name: _____		
<i>Last</i>	<i>First</i>	<i>Middle</i>
Address: _____		
<i>Street Address</i>	<i>Apartment/Unit #</i>	
<i>City</i> _____	<i>Province</i> _____	<i>Postal Code</i> _____
Daytime Phone: () _____		Evening Phone: () _____
Email Address: _____		
Relationship: _____		

Emergency Contact Information

Full Name: _____		
<i>Last</i>	<i>First</i>	
Address (if different from above): _____		
<i>City</i> _____	<i>Street Address</i>	<i>Apartment/Unit #</i>
<i>Province</i> _____	<i>Postal Code</i> _____	

Playing History

<p>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.</p> <p>With which Club did the player last register? _____</p> <p>In which country did the player last register? _____</p> <p>In which year did the player last register?: _____</p> <p>Has the player ever registered to play soccer in another country? ___ Yes ___ No</p> <p>If yes answer the following questions:</p> <p>a) In which country (other than Canada) did you last register? _____</p> <p>b) With which Club did last register in another country? _____</p> <p>c) In which year did you last register in another country? _____</p>	
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ONTARIO SOCCER ASSOCIATION PLAYER REGISTRATION FORM

Consent for Use of Personal Information

I authorize The Ontario Soccer Association 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 The Ontario Soccer Association;
- b) Receiving information from The Ontario Soccer Association's 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 The Ontario Soccer Association

I also authorize The Ontario Soccer Association to disclose me my child's/ward's personal information to the Canadian Soccer Association, District Association, 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; ITSportsnet; and third party agent to solely facilitate direct mailings from The Ontario Soccer Association.

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

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

I, _____, of the City of _____ and Province of Ontario, am fully informed as to the contents of this consent and understand the full import of powers to The Ontario Soccer Association, solemnly declare that I am of legal age and have authority and capacity to bind myself my child/ward and have executed this consent voluntarily.

Signature

Date

Acceptance of Terms and Conditions

In consideration of the acceptance of my membership in The Ontario Soccer Association, I, the participant and 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 The Ontario Soccer Association's computerized registration system.**
2. I have reviewed the waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement.
3. To abide by the published rules of The Ontario Soccer Association, my District Association (specify the name of your District Association), my League, and my Club (specify the name of your Club).
4. I am aware of The Ontario Soccer Association's 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.

I hereby accept the terms and conditions as described above. (Initial)_____

Acknowledgement

I acknowledge that I have read this registration agreement in its entirety and that I have executed this registration agreement voluntarily

Name of Participant

Signature of Participant

Witness

Date

Signature of Parent /Guardian (if under 18)

Witness

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. Dry land 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

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.

Printed Name of Parent or Guardian_____
Signature of Parent or Guardian_____
Date