



## North Durham United FC

P.O. Box 1456, Uxbridge ON L9P 1N6

Ph: 905-862-0083

registrar@northdurhamunited.com

### YOUTH Volunteer Application Form (Ages 16-19)

**Volunteer Role desired:** ☐ Co-Coach/Team Leader ☐ Team Manager ☐ Event Volunteer

Youth's Name \_\_\_\_\_ Birth Date (mm/dd/yy) \_\_\_\_\_ Gender \_\_\_\_\_

Home Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_  
(Street Address) (Town) (Province) (Postal Code)

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Emergency Phone & Email \_\_\_\_\_

Child or Division preferred \_\_\_\_\_ Year of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Request Co-coach (Name) \_\_\_\_\_

#### Consent for Use of Personal Information

I authorize the Canadian Soccer Association, Ontario Soccer, Durham Region Soccer Association, and North Durham United Football Club to collect and use personal information about me/my child for the purpose of receiving communications from the Canadian Soccer Association, Ontario Soccer, District Association, League and Club. 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](mailto: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 membership in Ontario Soccer, Durham Region Soccer Association and North Durham United Football Club, I, as the parent/guardian of the participant, agree as follows:

1. I understand that he/she cannot coach in any sanctioned soccer game until after this registration form has been validated and the registration data has been entered in the Ontario Soccer's computerized registration system.
2. I agree to comply with the volunteer screening process invoked by the North Durham United Football Club.
3. I have reviewed the waiver attached and my signature affixed hereto indicates my agreement with such waiver.
4. I am aware of the Ontario Soccer, Durham Region Soccer Association, North Durham United Football Club and League bylaws, policies, role descriptions, rules and regulations and agree to abide by them and to be bound by them.
5. I am aware that my child/ward may be contacted for interviews and be required to attend volunteer orientation meetings/practices prior to assuming duties.
6. I accept sole responsibility for my personal possessions and athletic equipment and accept all liability for any damage to the coaching equipment caused by my/my child's careless, negligent and/or improper handling.
7. I grant permission to the Organization to photograph and/or record my/my child's 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 parent or legal guardian of the volunteer being registered and to be bound by this Legal Agreement even if you have not read the agreement

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

\_\_\_\_\_  
Date

#### Club Use Only

Forms Complete: \_\_\_\_\_ Disclosure Complete: \_\_\_\_\_ Interview: \_\_\_\_\_ Orientation Complete: \_\_\_\_\_

Reference Check: \_\_\_\_\_ OSA # \_\_\_\_\_

NDUFC Screener: \_\_\_\_\_ Approval Date: \_\_\_\_\_

**Receipt of applications is appreciated by April 15th. Ontario Soccer Participant Agreement/Waiver with parent/guardian signature must accompany this Application.**

