



OLYMPIC FLAME SOCCER CLUB INC.

Parkway Mall, Box 62588, 85 Ellesmere Road, Scarborough, ON M1R 5G8

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PLAYER REGISTRATION FORM – 20__

A. PLAYER INFORMATION

Full Name: _____
Last First

Address: _____
Street Address Apartment/Unit #

Home Phone: (____) _____ **Cell Phone:** (____) _____
City Province Postal Code

Date of Birth: _____ **Gender:** M F **E-Mail Address:** _____
Year/Month/Date

Previous Club: _____ **OHIP #:** _____

Medical Issues (Please specify): _____

Age Division: U ____ **OUTDOOR HOUSE LEAGUE** **OUTDOOR COMPETITIVE** **INDOOR COMPETITIVE**

B. CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Canadian Soccer Association (the "CSA"), the Ontario Soccer Association (the "OSA"), the Scarborough Soccer Association (the "SSA") and the Olympic Flame Soccer Club Inc. (the "Club") to collect and use personal information about me or my child/ward for the purpose of receiving communications from the CSA, OSA, SSA, leagues and the Club. I also hereby consent to the use of my child/ward's image on the Club's website. I understand that I may withdraw consent to the collection, use or disclosure of my or my child/ward's personal information at anytime by contacting the Club.

****We do not sell or distribute your personal information to any other third party not listed herein.****

C. REFUND POLICY

A FULL REFUND LESS A \$50.00 ADMINISTRATION FEE WILL BE ISSUED BEFORE THE SEASON BEGINS. AFTER THE FIRST WEEK OF PLAY, NO REFUNDS WILL BE ISSUED. ANY CHEQUES RETURNED N.S.F. SHALL BE SUBJECT TO A \$30.00 ADMINISTRATION FEE.

D. VOLUNTEER

I would like to volunteer as a: **COACH** **MANAGER** **TRAINER** **REFEREE** **SPONSOR**

E. ACCEPTANCE OF TERMS AND CONDITIONS

- In consideration of the acceptance of my child/ward's membership in the Club, I, the parent/guardian of the Participant, 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 OSA's computerized registration system.
 2. I have reviewed the Waiver and Participation Agreement attached hereto as Page 2, and my signature affixed hereto indicates my agreement with such Waiver and Participation Agreement.
 3. I am aware of the OSA, SSA & Club bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
 4. I accept sole responsibility for my or my child/ward's personal possessions and athletic equipment.
 5. I accept all liability for any damage to the playing equipment caused by me or my child/ward's careless, negligent and/or improper handling.

I acknowledge that I have read this registration agreement in its entirety, including the attached Waiver and Participation Agreement and that I have executed this registration agreement voluntarily.

 Signature of Parent/Guardian Date

SEE OVER →

F. PAYMENT OF REGISTRATION AND ACCEPTANCE BY CLUB (for Club use only)

REGISTRATION FEE PAID: \$ _____ **METHOD OF PAYMENT:** CASH CHEQUE OTHER _____

 Signature of Club Official Date

ONTARIO SOCCER
WAIVER AND PARTICIPATION AGREEMENT*
(By signing this form you will waive certain legal rights. Please read carefully!)

IN CONSIDERATION of allowing my minor child/ward to participate in the programs, activities and events of Ontario Soccer (the “OS”), the Scarborough Soccer Association (the “SSA”), the Olympic Flame Soccer Club Inc. (the “Club”), and various leagues. **I ASSURE TO YOU THAT:**

1. I am the parent/guardian of the named Participant and have full legal responsibility for decisions regarding the named Participant.
2. I believe that my child/ward is physically, emotionally and mentally able to participate in the programs, activities and events of the OSA, the SSA and the Club.

Disclaimer

I acknowledge and agree that the Club, its directors, officers, members, employees, coaches, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities, and representatives (collectively the “Organization”) are not responsible for any injury, damage or loss of any kind suffered by a Participant during, or as a result of, any program, activity or event, caused in any manner whatsoever including, but not limited to, the negligence of the Organization.

Description of Risks

In further consideration of my child/ward’s 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;
- dry land training including weights, running, and massage;
- grass, turf and other surfaces including bacterial infections and rashes;
- falls to the ground due to uneven or irregular terrain or surfaces;
- collisions with walls and soccer equipment;
- failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
- extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
- contact, colliding or being struck by other participants, spectators, equipment or vehicles;
- vigorous physical exertion and strenuous cardiovascular workouts;
- 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, cause spinal cord injuries and even be fatal;
- my child may come into close contact with other participants, including the possibility of accidental and unexpected contact;
- my child may experience anxiety while challenging himself/herself during the activities;
- my child’s risk of injury is reduced if he/she follows all rules adopted during training; and
- my child’s risk of injury increases as he/she becomes fatigued.

Release of Liability

In further consideration of the Organization allowing my child to be a Participant in its soccer program, I agree:

- (a) to assume all risks arising out of, associated with or related to my child’s participation;
- (b) to be solely responsible for any injury, loss or damage that my child might sustain while participating; and
- (c) to release the Organization from liability for any and all claims, demands, actions and costs that might arise out of my child participating, even though such risks, injuries, loss, damage, claims, demands, actions or costs may have been caused by the negligence of the Organization.

Accident Insurance

Executing this agreement will not preclude you from accident insurance coverage, subject to the terms and conditions of the OS’s insurance policy.

Acknowledgment

I acknowledge that I have read this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my child/Participant, my heirs, executors, administrators and representatives.

**This Waiver and Release of Liability is in a form prescribed by the Ontario Soccer Association and the Scarborough Soccer Association.*