

TORONTO SOCCER ASSOCIATION-PLAYER REGISTRATION FORM

PERSONAL INFORMATION						
Full Name:	Look		First		A4.1	
Address:	Last		First		M.I.	
S	Street Address				Apartment/Unit #	
C	Sity			Province	Postal Code	
Home Phone: _	()	Bus	iness Phone:	()		
Cell Number:		E-mail Address	: <u> </u>			
Birth Date: (y/m/d)	0	SA Registrant #			Gender:	
		PLAYING HIST	ORY			
information or with one year.	The "PLAYING HISTOR inholds any of the required in the registered to play socce	nformation will be susp	ended from all Ont			
If Yes, answer the a) In wh b) With	e following questions: ich country (other than Car which Club did the player <u>le</u> ich year did the player last	nada) did the player <u>las</u> ast register in another	st register?			
C) in wh	, ,	FOR USE OF PERS		TION		
Lauthorizo the Ca	nadian Soccer Association				nd use personal	
information about	me or my child/ward for the and address to the (Munic	e purpose of receiving	communications; a	nd the disclosur	e of my or my	
Privacy Officer at Association, 760 withdrawal.	I may withdraw such conse OSAPrivacyOfficer@soc 1 Martin Grove Road, Var not sell or distribute you	cer.on.ca or by mail to ughan ON L4L 9E4. T	: Attention: OSA F he Privacy Officer	Privacy Officer, will advise the in	, Ontario Soccer mplications of such	
we do		PTANCE OF TERMS A			ed Herein.	
	he acceptance of my or my ch I parent/guardian (if participan	ild/ward's membership in	the Ontario Soccer A		t Association and Club,	
 I understand that I or 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. I have reviewed the waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement. 						
 I am aware of The Ontario Soccer Association, Toronto Soccer Association 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 or my child/ward's personal possessions and athletic equipment. 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.	have read this registration ag					
	cipant (If aged18 and over)	Signature of Parent	/Guardian (If under			
Club Name:						
Player Classificati	on:					
Indoor:Mini IndoorYouth IndoorSenior IndoorPro IndoorMini FutsalYouth FutsalSenior FutsalPro Futsal						
Outdoor:Mini O	utdoorYouth Competitive	Youth Recreational _	_Senior Competitive	Senior Recrea	tionalPro Outdoor	
For use by CLUB F	REGISTRAR late: Birth Certificate I	Plaver Book Other	DISTRICT SIGNAT	URE		
	iate birtii Gertiiicate i	a, or book Other				
Data .			Date			



TORONTO SOCCER ASSOCIATION WAIVER AND RELEASE OF LIABILITY

(To be signed by participants 18 yrs of age and older)

By signing this form you give up important legal rights. Please read carefully!

This is a binding legal agreement. As a Participant in the programs, activities and events of the Ontario Soccer Association, their Districts, Leagues and Clubs, the undersigned acknowledges and agrees to the following terms.

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.

Disclaimer

The Ontario Soccer Association, their Districts, Leagues and Clubs, directors, officers, members, employees, coaches, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities, and representatives (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 consideration of my participation as a Participant 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;
- Dryland 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;
- Spinal cord injuries which may render me permanently paralyzed;
- 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;
- That I may come into close contact with other participants, including the possibility of accidental and unexpected contact;
- That I may experience anxiety while challenging myself during the activities;
- · That my risk of injury is reduced if I follow all rules adopted during training; and
- That my risk of injury increases as I become fatigued.

Release of Liability

In consideration of the Organization allowing me to participate as a Participant, I agree:

- a) To assume all risks arising out of, associated with or related to my participation;
- b) To be solely responsible for any injury, loss or damage that I 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 participating, even though such risks, injuries, loss, damage, claims, demands, actions or costs may have been caused by the negligence of the Organization.

Acknowledgement

Acknowledgement
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 heirs, executors, administrators and
representatives.

Name of Participant	- Date	
Signature of Participant	-	