REGISTRATION FORM ***Please Print Clearly - Press Hard***

Date of Birth: M / D / Y Verified ❑ Male ❑ Female ❑

OSA ID # _____ Club Registration#: CD1822

Player Name: (First name) _____ (Last Name) _____

Address: _____ Town/City: _____

Province: _____ P/C: _____ Email: _____

Phone: Res.:_____ Cell.:_____

Parents or Guardians Names: Mother: _____ Father: _____

Cell: _____ Cell: _____

PLAYER HISTORY

ATTENTION: *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.

Season Type: Indoor ❑ Outdoor ❑ ❑ **Would you be interested in a Rep/Select Team?**

Micro ❑ Mini ❑ Youth Competitive ❑ Youth Recreational ❑

Club the player last registered: _____ Country: _____ Year: _____ # of years played: _____

NOTICE OF WARNING: There is a potential risk in training and participating in any sport, and we have tried to create a safe environment. The Coach has established rules for participation; and proper conduct on or about the playing field that must be followed. ***Parent(s)/Guardian(s) must be present at all practices/games, the coach is not responsible for your child(ren).***

Registration Rules*: The player named on this form is registered only after*:

- The form has been properly and fully completed;
- The form has been signed by the player (or parent/guardian) and by the club registrar;
- All monies have been paid in full, and the registration data has been entered into AIMS - The Ontario Soccer Association by the Club Official.

AGREEMENT: I have read and understand the **NOTICE OF WARNING** and **REGISTRATION RULES**. I agree to abide by the registration rules and also the Published Rules of The Ontario Soccer Association, the Huronia District Soccer Association, my League, and the Wasaga Beach Soccer Club.

I authorize the Ontario Soccer Association, *Huronia District Soccer Association, Wasaga Beach Soccer Club* and all Affiliated Clubs ie (CGSL, CSL, YRSL, SCYSL) to collect and use personal information about me or my child/ward for the following purposes: Receiving communications from the Ontario Soccer Association, District Association, Club and League; Determining appropriate age group, player classification and eligibility; Player identification and recruitment. I also authorize the Ontario Soccer Association, District Association and Club to disclose my or my child's/ward's personal Information to the Canadian Soccer Association, the League in which I or my child/ward plays, and all Tournament Host Organizations for the purpose of registration and to communicate with registrants about soccer programs, events and activities; AIMS for The Ontario Soccer Association; and a third party agent to solely facilitate direct mailings and for no other purpose. 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.con.ca or 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.****

NO REFUNDS _____ Initial

X _____ X _____ M / D / Y _____

Signature of Participant (If aged 18 and over) Signature of Parent/Guardian (If under 18) Date:

Fee Paid: $_____Cash ❑ Cheque ❑ Date: _____ **Witness:**_____

Note: A $25.00 Charge Will Be Applied To All NSF Cheques

If you have applied to coach your child's team, have you completed a coach's application form? Yes ❑ No ❑

VOLUNTEERS NEEDED - check here: ❑ Coach ❑ Asst Coach ❑ Manager ❑ Trainer ❑ Other _____