

# SOUTH SIMCOE UNITED FC – PLAYER REGISTRATION FORM 2019/2020 INDOOR

Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Sex: \_\_\_\_\_  
month day year

Name of Player: (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Street Address: \_\_\_\_\_ Town: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Township: \_\_\_\_\_

Phone: Res: \_\_\_\_\_ Bus: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Parent or Guardian Names: Mother: \_\_\_\_\_ Father: \_\_\_\_\_

How did you hear about us? Newspaper Parks & Rec Guide Friend/Family Social Media Website Canada Post Flyer Mail Out  
 School Flyer Hand Out Other: \_\_\_\_\_

**ATTENTION: This "PLAYING HISTORY" section MUST be completed** – Any person who provides false information or withholds any of the required information will be suspended from all Ontario Soccer activities for one year. **New Player to Soccer? Yes \_\_\_\_\_ No \_\_\_\_\_**

Last club registered for outdoor: \_\_\_\_\_ Date Last Registered \_\_\_\_\_ Country of Club \_\_\_\_\_

Has this player ever registered to play soccer in another country? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, a) Name of Country \_\_\_\_\_ b) Name of Club \_\_\_\_\_ c) Last Year Registered \_\_\_\_\_

### CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Canadian Soccer Association, Ontario Soccer, the Huronia District Soccer Association, and South Simcoe United FC to collect and use personal information about me or my child/ward 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 OS Privacy Officer at [privacy@ontariosoccer.ca](mailto:privacy@ontariosoccer.ca) or by mail to: **Attention: OS 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 the Ontario Soccer, District Association and Club, I, the participant and parent/guardian (if participant is under 18 years of age), agree as follows:

- 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 Ontario Soccer Association's computerized registration system.
- I have read & understand the waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement.
- I am aware of Ontario Soccer, Huronia District Soccer Association, South Simcoe United FC 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 and accept all liability for any damage to the playing equipment caused by my careless, negligent and/or improper handling.
- I grant permission to South Simcoe United FC to photograph and/or record my 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 SSU through 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.

### REFUND POLICY

All refund requests must be submitted in writing to the club office using a SSU FC refund form with a copy of the registration receipt. All refund requests are subject to a \$30 admin fee. Refunds will be issued only to the adult/guardian named on the online/in person registration system.

- A paid registration fee shall be fully refunded in the event that SSU is unable to field a team or provide a suitable program alternative.
- No refund** will be granted after the posted registration deadline for both indoor and outdoor programs.
- There will be **no refund** for a registration fee if a player is suspended due to disciplinary action by SSU FC or a league.
- A \$25 fee will be applied to all NSF/ returned payments.

The club treasurer may grant a partial refund under medical or extenuating circumstances (illness, death, etc.) excluding administration fees, uniform and operational costs. All requests must have supporting documentation from a medical doctor.

### VOLUNTEERING – Please choose one

Coaching:  Assistant:  Join the Executive:  Not interested:  Contact me for Outdoor 2020:

I might be interested but require more information:

By signing and dating the below you agree that you are the player/parent/guardian being registered and to be bound by this Legal Agreement event if you have not read this agreement.

Signature of Parent/Guardian (If player under 18) \_\_\_\_\_ Signature of Player (If aged 18 and over) \_\_\_\_\_ Date \_\_\_\_\_

Fee Paid: \$ \_\_\_\_\_ Cash: \_\_\_\_\_ Cheque: \_\_\_\_\_ Visa: \_\_\_\_\_ M/C: \_\_\_\_\_ Etransfer: \_\_\_\_\_ Date: \_\_\_\_\_

**ONTARIO SOCCER/ SOUTH SIMCOE UNITED FC 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** \_\_\_\_\_

**ALL PROGRAMS AND ACTIVITIES HAS ITS RISKS**

I participate in the game of soccer because it is physically and mentally challenging. In consideration of my participation in such programs, activities and events, I hereby acknowledge that I am aware of the risks and hazards associated with or related to this activity. The risks and hazards include, but are not limited to:

- Injuries from executing strenuous and demanding physical techniques in soccer;
- Injuries from dryland training including weights, running and massage;
- Injuries from grass, turf and other surfaces including bacterial infections and rashes
- Injuries from collisions with walls and soccer equipment
- Injuries resulting from 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
- Injuries from extreme weather conditions which may result in heatstroke, sunstroke or hypothermia
- Injuries from contact, colliding or being struck by other participants, spectators, equipment or vehicles
- Injuries resulting from vigorous physical exertion and strenuous cardiovascular workouts
- Injuries from 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 experience anxiety while challenging myself during the activities;
- That I may come into close contact with other participants, including the possibility of accidental and unexpected contact;
- That my risk of injury is reduced if I follow all rules established for participation; and
- That my risk of injury increases as I become fatigued.

**I AGREE TO BE RESPONSIBLE FOR MYSELF**

I am participating voluntarily in these activities, events and programs. I agree that there are risks in soccer as described above. By participating voluntarily in these events, activities and programs, I am exposed to these risks and hazards. I agree to accept them and be responsible for any injury or other loss which I might receive while participating in these events, activities and programs.

If something happens to me, I release the organizers of responsibility for any claims, demands, actions and costs which might arise out of my participation. In this Agreement I understand "organizers" to mean: Ontario Soccer, District Associations, Leagues, South Simcoe United FC and their directors, officers, members, employees, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities and representative.

**INSURANCE**

Executing this agreement may not preclude you from insurance coverage.

**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