

If the waiver page (the last page) is not completed in its entirety your registration will NOT be processed.

Summer 2017
Youth Competitive Registration Form

Personal Information

Player Name: _____ DOB: _____ Gender: M / F
Last First Middle Initial (DD/MM/YY) circle one

Parent(s) Name(s): _____

Address: _____
Street Address Apartment/Unit#

City Province Postal Code

Home Phone: (____) _____ Bus. Phone: (____) _____ Cell Phone: (____) _____

Email: _____ Proof of Age (new players only): ☐ Birth Cert. ☐ Health Card ☐ Other

League/Division

U13(2004) and U14(2003) Youth Competitive \$275	\$275	
U15(2002), U16(2001), U17(2000) and U18(1999) Youth Competitive \$275 + \$35.75hst = \$310.75	\$310.75	
Volunteer Fee – one per family – refundable at end of season as per volunteer policy	+\$25	
Payable by CASH or Cheque (cheques payable to KDSC) NSF Cheques – a \$25 administrative fee <u>will</u> be charged back to the player/parent.	Total Due	

Playing History

This section must be completed – Any person who withholds or falsifies any of the required information will be suspended from all OSA activities for one year.

What club did you last registered with? _____ Which Year? _____

Have you ever registered to play soccer in another Country ☐ Yes ☐ No

If yes, then: In which Country (other than Canada) did the player last register? _____

With which Club did the player last register with in another country? _____

Which Year? _____

Club Representative to Complete

Name of Payer: _____

Date Received: _____

Cash Amount: _____ or CHQ#: _____ CHQ Amount: _____ Dated: _____

Authorized Signature: _____

revised Mar, 2017

Kemptonville District Soccer Club Volunteer Form

(one Volunteer Form per family)

The Kemptonville District Soccer Club cannot function without volunteers at many levels. Each KDSC family will be charged one \$25 fee which is refunded post-season if a family representative performs a recognized Volunteer Duty. The \$25 will be refunded to the person who paid the registration fees.

Name: _____

Name and Year of Birth of your child(ren)

Email: _____

Telephone: _____

Are you a: parent, player or student
volunteer? (circle one)

Please indicate the top 3 choices you wish to commit to – please number your choices in order of preference.

___ Team Bench Staff – circle preference

- Coach
- Assistant Coach
- Team Manager

___ Event Team

- Fun Festival
- Tournament Hosting

___ Division Convener

- Liaise with team Managers
- Divide players into teams
- Create game schedules

- Book venues for indoor programs and competitive tryouts
- Reschedule necessary games

___ Volunteer Team

- Contact, coordinate volunteers
- Track and verify volunteer hours

___ Equipment Set Up on Game Days

- Set up and put away portable nets

___ Field Marshal

- Monitor games to avoid potential problems

___ Committee Member

- Committees to be finalized

___ Equipment/Uniforms

- Pre-season packing of team kits
- Equipment out to Managers
- Equipment Return

___ Board Member

- Check website for vacancies

___ Photo Day

- Photo Day Coordinator
- Help with organization on photo day

OR *****

___ I do not wish to volunteer at this time. (KDSC will not refund your \$25)

More details about volunteer positions and policies on our website at www.kemptonvillesoccer.com

Consent for use of Personal Information

I authorize the Canadian Soccer Association, Ontario Soccer Association, Eastern Ontario District Soccer Association and Kemptville District Soccer Club to collect and use personal information about my child/ward for the purpose of receiving communications from the Canadian Soccer Association, Ontario Soccer Association, District Association, League and Club.

I understand that I may withdraw such consent related to receiving communications at any time by contacting the OSA Privacy Officer at **OSAPrivacyOfficer@soccer.on.ca** or by mail to: **Attention: OSA Privacy Officer, Ontario Soccer Association, 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 child/ward's membership in the Ontario Soccer Association, District Association and Club, I, the parent/guardian (for the participant under 18 years of age), 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 Ontario Soccer Association's computerized registration system.
2. I have reviewed the participation agreement attached and my signature affixed hereto indicates my agreement with such participation agreement.
3. I am aware of The Ontario Soccer Association, Eastern Ontario District Soccer Association, Kemptville District Soccer Club and League bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
4. I accept sole responsibility for my child/ward's personal possessions and athletic equipment.
5. I accept all liability for any damage to the playing equipment caused by my child/ward's careless, negligent and/or improper handling.
6. I understand that KDSC may take photographs or videos of participants. I grant permission without compensation that these photographs or video may be used in publications, presentations, websites or promotions of the Kemptville District Soccer Club.
7. Equipment – Competitive players must purchase their own uniforms as per KDSC guidelines. Team managers will be responsible for placing orders and dealing with payment.

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

X _____
Signature of Parent or Guardian

X _____
Date

Waiver and Participation Agreement for those under 18 years.

By signing this document 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 The Ontario Soccer Association, **I ASSURE TO YOU THAT:**

1. I am the parent/guardian of the above named participant having full legal responsibility for decisions regarding the above 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 Ontario Soccer Association.
3. I hereby acknowledge that I am aware of the risks and hazards associated with or related to soccer. The risks and hazards include, but are not limited to injuries from:
 - a. Executing strenuous and demanding physical techniques in soccer;
 - b. Dryland training including weights, running and massage;
 - c. Grass, turf and other surfaces including bacterial infections and rashes;
 - d. Falls to the ground due to uneven or irregular terrain or surfaces;
 - e. Collisions with walls and soccer equipment;
 - f. Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
 - g. Extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
 - h. Contact, colliding or being struck by other participants, spectators, equipment or vehicles;
 - i. Vigorous physical exertion and strenuous cardiovascular workouts;
 - j. Exerting and stretching various muscle groups; and
 - k. Travel to and from competitive events and associated non-competitive events which are an integral part of the organization's activities.
4. Furthermore, I am aware:
 - a. Sustain injuries in soccer that can be severe, cause spinal cord injuries and even be fatal;
 - b. Experience anxiety while challenging himself/herself during the activities, events and programs;
 - c. Come into close contact with other participants, including the possibility of accidental and unexpected contact;
 - d. Risk of injury is reduced if he/she follows all rules established for participation; and
 - e. Risk of injury increases as he/she become fatigued.

I UNDERSTAND AND AGREE, on behalf of myself, my heirs, assigns, personal representatives and next of kin that my signing of this document constitutes:

5. I agree to accept all these risks and hazards and be responsible for any injury or other loss which my minor child/ward might receive while participating in these events, activities and programs.
6. I am registering my child/ward willingly and my child/ward is participating voluntarily in these activities, events and programs.
7. I agree that there are risks in soccer as described above and my child/ward will be exposed to these risks and hazards.
8. If something happens to my child/ward, I release the Organizers of responsibility for any claims, demands, actions and costs which might arise out of my child/ward's participation. I understand "Organizers" to mean: The Ontario Soccer Association, District Associations, Leagues, Clubs and their directors, officers, members, employees, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities, and representatives.

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.

I ACKNOWLEDGE MAKING THIS AGREEMENT

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

X _____
Signature of Parent or Guardian

X _____
Printed Name of Parent or Guardian

X _____
Date