

SPRINGWATER SOCCER ASSOCIATION

2010 Soccer Registration Form

P.O. Box 20042, Barrie Ont. L4M 6E9

Please make cheques payable to Springwater Soccer Association. For additional information, visit our link at www.springwater.ca or call the soccerline at 792-0078.

Player's Name: _____ Male _____ Female _____

Birthdate: _____ (first) _____ (last) Phone: Home _____ Alternate: _____
Day Month Year

Parent/Guardian Name(s): _____

Address: _____
Street Address City Postal Code

Born 2007 – 3 yr. old _____ \$50 (Must be 3 yrs. old by June 1, 2010)	Born 2002 – 8 yr. old _____ \$120
Born 2006 - 4 yr. old _____ \$115	Born 2001 – 9 yr. old _____ \$120
Born 2005– 5 yr. old _____ \$115	Born 2000/1999 – 10/11 yr. old _____ \$125
Born 2004 – 6 yr. old _____ \$120	Born 1998/1997/1996 – 12/13/14 yr. old _____ \$125
Born 2003 – 7 yr. old _____ \$120	2 or more children: Pay full fee for first 2 children – half price for each additional child

COACH / ASST. COACH / CONVENOR: Would you be willing to volunteer in one of the following:

Coach _____ Asst. Coach _____ Convenor _____

Would you be interested in attending a Coaching Information Clinic? Yes _____ No _____

Referee: Do you know of a child that would be interested in Ref'ing?

Child's Name: _____

CONSENT FOR USE OF PERSONAL INFORMATION

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

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.on.ca or by mail to: OSA Privacy Officer, The Ontario Soccer Association, 7601 Martin Grove Rd., Vaughan, Ont. L4L 9E4. *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 Association, District Association and Club, I, the participant and parent/guardian (if participant is under 18 years of age) agree as follows:

1. 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.
 2. I have reviewed the waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement.
 3. I am aware of The Ontario Soccer Association, Huronia District Soccer Association, Springwater Soccer Association and league by-laws, 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 and that I have executed this registration agreement voluntarily.

Parent/Guardian Signature (Note: Parent must sign for players under 18 yrs. old)

Paid by: Cash _____ Cheque #: _____ Amount: _____ Date: _____

Paid Family Rate: Cash _____ Cheque #: _____ Amount: _____ Date: _____