

# ONTARIO SOCCER REGISTRATION FORM

## REGISTRANT INFORMATION

FIRST NAME:	LAST NAME:	
ADDRESS:		
CITY:	PROVINCE:	POSTAL CODE:
PHONE NUMBER:	EMAIL ADDRESS:	
DATE OF BIRTH: (Y/M/D)	REGISTRATION NUMBER:	
REGISTERING AS A: <input type="checkbox"/> PLAYER	<input type="checkbox"/> TEAM OFFICIAL (COACH, MANAGER, ETC.)	
REGISTERING AS A: <input type="checkbox"/> ADMINISTRATOR	or VOLUNTEER	

## TEAM / ORGANIZATION DETAILS

ORGANIZATION NAME:	
SEASON TYPE REGISTERING FOR: <input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR <input type="checkbox"/> FUTSAL	
PLAYER CLASSIFICATION:	
INDOOR: <input type="checkbox"/> GRASSROOTS <input type="checkbox"/> YOUTH <input type="checkbox"/> SENIOR	
OUTDOOR: <input type="checkbox"/> GRASSROOTS <input type="checkbox"/> YOUTH REC. <input type="checkbox"/> YOUTH COMP. <input type="checkbox"/> SR. REC. <input type="checkbox"/> SR. COMP.	
TEAM NAME:	LEAGUE NAME:
DIVISION NAME:	

## PLAYING HISTORY – FOR PLAYERS ONLY

Has the player **ever** registered to play soccer in another country?  Yes  No

If yes, answer the following questions:

- In which country (other than Canada) did the player last register?
- With which Club did the player last register in another country?
- In which year did the player last register in another country?

## CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Canadian Soccer Association, \*Ontario Soccer, the applicable District Association and Soccer Organization to collect and use personal information about me for the purpose of receiving communications from the Canadian Soccer Association, Ontario Soccer, District Association, League and Soccer Organization. I understand that I may withdraw such consent related to receiving communications at any time by contacting the Ontario Soccer Privacy Officer at [privacy@ontariosoccer.ca](mailto:privacy@ontariosoccer.ca) or by mail to: Attention: 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 or my child/ward's membership in the Ontario Soccer, District Association and Club/Academy, I, the participant, agree as follows:

- I understand that I 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's computerized registration system.
- I have read and understand the waiver attached and my signature affixed hereto indicates my agreement with such waiver.
- I am aware of Ontario Soccer, District Association and Club/Academy's 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 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 the Organization 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 the Organizations through the 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.

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

\_\_\_\_\_  
Registrant's Signature or Parent/Legal Guardian if under 18

DATE: \_\_\_\_\_

### DOCUMENTATION HAS BEEN VALIDATED BY ORGANIZATION

SIGNATURE : \_\_\_\_\_ DATE: \_\_\_\_\_

### DISTRICT ASSOCIATION/ONTARIO SOCCER VALIDATION

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



Play. Inspire. Unite.

