



# ELGIN MIDDLESEX SOCCER ASSOCIATION

TEAM/PLAYER  
REGISTRATION FORM

## OUTDOOR / INDOOR

CLUB NAME: \_\_\_\_\_ CLUB #: CD - 15 - \_\_\_\_\_

TEAM NAME: \_\_\_\_\_ TEAM # : \_\_\_\_\_

TEAM AGE CATEGORY: \_\_\_\_\_ Male/Female

LEAGUE NAME: \_\_\_\_\_ LEAGUE LEVEL: \_\_\_\_\_

LEAGUE DIVISION: \_\_\_\_\_

I certify that the individuals listed on the attached pages have registered as playing members of this club and meet the minimum requirements for player registration as set out by the OSA. These players do not require an ITC or Reinstatement as an Amateur.

NAME OF CLUB REGISTRAR (TYPE): \_\_\_\_\_

SIGNATURE OF CLUB REGISTRAR: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*\*PLEASE NOTE: THIS PAGE MUST ALSO BE COMPLETED FOR ANY NEW REGISTRATIONS TO TEAMS\*\***

**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 Club has established rules for participation; and proper conduct on or about the playing field must be followed. I agree to abide by the Constitution, by-laws, rules and regulations of the Club, the Elgin-Middlesex Soccer Association and the Ontario Soccer Association.

THE FRONT PAGE OF THE TEAM AND PLAYER REGISTRATION FORM MUST BE COMPLETED, SIGNED BY THE CLUB REGISTRAR AND BE ATTACHED TO THIS FORM TO REGISTER ANY ADDITIONAL PLAYER.

Name: \_\_\_\_\_ Male- Female Birthdate: Y \_\_\_\_ /M \_\_\_\_ /D \_\_\_\_

Address: \_\_\_\_\_ OSA Reg.#: \_\_\_\_\_

Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Year Last Played: \_\_\_\_\_ Last Registered Club: \_\_\_\_\_

Player's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**N. B. I have read and understand the "Notice of Warning" before signing.**

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Name: \_\_\_\_\_ Male- Female Birthdate: Y /M /D  
Address: \_\_\_\_\_ OSA Reg.#: \_\_\_\_\_  
Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Year Last Played: \_\_\_\_\_ Last Registered Club: \_\_\_\_\_  
Player's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**N. B. I have read and understand the "Notice of Warning" before signing**

Name: \_\_\_\_\_ Male- Female Birthdate: Y /M /D  
Address: \_\_\_\_\_ OSA Reg.#: \_\_\_\_\_  
Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Year Last Played: \_\_\_\_\_ Last Registered Club: \_\_\_\_\_  
Player's Signature: \_\_\_\_\_ Date \_\_\_\_\_

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Name: \_\_\_\_\_ Male- Female Birthdate: Y /M /D  
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