

NIPISSING DISTRICT ADULT SOCCER CLUB

ADMINISTRATOR REGISTRATION FORM - 2008

PERSONAL INFORMATION				
Last Name (Please Print)		First Name (Please Print)		OSA No.
Street Address (Please Print) (705)		Apt/Unit (705)	City	Postal Code
Home Phone	Work Phone	Alternate Phone	e-mail address	
Birthdate: _____ / _____ / _____ yyyy mm dd	Sex: _____	<input type="checkbox"/> OSA Book	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Other
LEAGUE/TEAM INFORMATION				
<input type="checkbox"/> Premier - Ladies <input type="checkbox"/> Premier - Men <input type="checkbox"/> Second - Men				
Team Name: _____			Position	
Club Name: Nipissing District Adult Soccer Club				
League Name: Nipissing District Adult Soccer League				
CONSENT FOR USE OF PERSONAL INFORMATION				
I authorize the Canadian Soccer Association, the Ontario Soccer Association, the Soccer NorthEastern Ontario, and the Armstrong Park S. C. to collect and use personal information about me for the purpose of receiving communications from the Ontario Soccer Association, District, 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 or my child/ward's 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 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, Soccer NorthEastern Ontario, Nipissing District Adult Soccer Club and League Bylaws, Policies and Rules and Regulations and agree to abide by them and to be bound by them.				
4. I accept sole responsibility for my personal possessions and athletic equipment.				
5. I accept all liability for any damage to the playing equipment caused by me or my 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.				
_____ Signature of Participant			_____ Date	
For use by CLUB REGISTRAR				
_____ Registrar - Signature		_____ Date		

NOTE: The "Waiver Form" (Page 2) must be completed and signed or the Registration Form will not be accepted. Registration and waiver forms must be retained by the Club and, if requested, submitted to the District or the Ontario Soccer Association for review.

Revised 2007-04-15