

Blenheim Community Soccer League – PLAYER REGISTRATION FORM

PERSONAL INFORMATION

Last Name:	First Name:	MI:
Street Address:		Apt/Unit #:
City:	Province:	Postal Code: -
Home Phone:	Alt: Phone:	Email:
Birth Date(yyyy/mm/dd): / /		Proof of Birthdate: Birth Certificate <input type="checkbox"/> Other <input type="checkbox"/>
Sex: Male <input type="checkbox"/>	Female <input type="checkbox"/>	OSA Registrant Number:

TEAM DETAILS

Club Registration Number: CD - ____ - ____ - ____	Club Name: Blenheim Community Soccer League
Season Type: Outdoor <input checked="" type="checkbox"/>	Amount Received: \$ _____
Player Classification Outdoor: <input type="checkbox"/> Houseleague <input type="checkbox"/> Travel	Paid By: Chq # <input type="checkbox"/> Cash <input type="checkbox"/>

TRAVEL TEAM/VOLUNTEER OPPORTUNITIES

We are looking at opportunities to offer competitive travel teams if there is enough players interested	Interested in playing on a competitive travel team?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Would you be able to volunteer your time in the following positions?			
Coach <input type="checkbox"/>	Convener <input type="checkbox"/>	Referee <input type="checkbox"/>	Field Maintenance <input type="checkbox"/>
Fund Raising <input type="checkbox"/>	Registration <input type="checkbox"/>	Board Member <input type="checkbox"/>	Other <input type="checkbox"/>

TOBACCO FREE SPORTS INITIATIVE

We ask that you refrain from using tobacco industry products during activities sanctioned by the Blenheim Community Soccer League (BCSL). On January 12th, 2009, the Blenheim Community Soccer League adopted a tobacco-free policy prohibiting the use of all forms of tobacco during league activities and events. This means that all games, activities, tournaments, competitions, sponsored events, and other activities sanctioned by our league will be tobacco-free. Tobacco-free means no smoking, snuffing, dipping or chewing tobacco by players/participants, coaches, conveners, officials, parents and the general public. We appreciate your consideration of this matter.



ACCEPTANCE OF TERMS AND CONDITIONS

In consideration of the acceptance of my membership in the Blenheim Community Soccer League, 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 Blenheim Community Soccer League'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 Sun County Soccer League and Blenheim Community Soccer 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 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.

	X	
Signature of Participant (If aged 13 and over)	Signature of Parent/Guardian (If under 18)	Date

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Participant's Agreement (To Be Used for Players Under the Age of 18)

Name of Participant: _____ Age if Under 18: _____

ALL PROGRAMS AND ACTIVITIES HAVE ITS RISKS

I participate in the game of soccer because it is physically and mentally challenging. In consideration of my participation in such programs, activities and events, I hereby acknowledge that I am aware of the risks and hazards associated with or related to this activity. The risks and hazards include, but are not limited to:

- Injuries from executing strenuous and demanding physical techniques in soccer
- Injuries from dry land training including weights, running, and massage
- Injuries from grass, turf and other surfaces including bacterial infections and rashes
- Injuries resulting from falls to the ground due to uneven or irregular terrain or surfaces
- Injuries from collisions with walls and soccer equipment
- Injuries resulting from failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment
- Spinal cord injuries which may render me permanently paralyzed
- Injuries from extreme weather conditions which may result in heatstroke, sunstroke or hypothermia
- Injuries from contact, colliding or being struck by other participants, spectators, equipment or vehicles
- Injuries resulting from vigorous physical exertion and strenuous cardiovascular workouts
- Injuries from exerting and stretching various muscle groups, and
- Travel to and from competitive events and associated non-competitive events which are in integral part of the organization's activities

Furthermore, I am aware:

- That injuries sustained in soccer can be severe
- That I may experience anxiety while challenging myself during the activities
- That I may come into close contact with other participants, including the possibility of accidental and unexpected contact
- That my risk of injury is reduced if I follow all rules established for participation, and
- That my risk of injury increases as I become fatigued

I AGREE TO BE RESPONSIBLE FOR MYSELF

I am participating voluntarily in these activities, events and programs. I agree that there are risks in soccer as described above. By participating voluntarily in these events, activities and programs, I am exposed to these risks and hazards. I agree to accept them and be responsible for any injury or other loss which I might receive while participating in these events, activities and programs.

If something happens to me, I release the organizers of responsibility for any claims, demands, actions and costs which might arise out of my participation. In this Agreement I understand "organizers" to mean: The Sun County Soccer League, Blenheim Community Soccer League Clubs and their directors, officers, members, employees, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities, and representatives.

I ACKNOWLEDGE MAKING THIS AGREEMENT

I have read and understood the terms and conditions of this agreement, and by signing it voluntarily, I am agreeing to abide by these terms.

Printed Name of Participant (If over the age of 13)

Signature of Participant (If over the age of 13)

Printed Name of Parent or Guardian

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Signature of Parent or Guardian

Dated: _____