



Cumberland United-Unis Soccer Club

Office: 860 Taylor Creek #5, Orleans, Ontario K1C-1T1
Email: admin@cumberlandsoccer.com Tel: 613-837-9282



2011/2012 ADULT Fall/Winter Indoor Registration Form

PLAYER INFORMATION

Please print legibly. Forms may not be processed immediately if we cannot read the information

Family Name: _____
First Name: _____
Gender: Male Female Approximate Years playing soccer: _____
Address: _____
City: _____ Postal Code: _____
Birth Date: Year _____ Month _____ Day _____ Home Phone: (____) _____
Work Phone: (____) _____ Cell Phone: (____) _____
Email: (print carefully) _____

(Office Use Only)	
CUSC Registration #	

Birth Certificate	<input type="checkbox"/>
Previous Registration	<input type="checkbox"/>
Cheque Date	<input type="checkbox"/>
Entered in CUSC DB	<input type="checkbox"/>

FRIENDS

(Note: Where possible, we will try to accommodate requests to play with friends on the Women's House League Teams only.)

Name #1: _____ Name #2: _____

REGISTRATION FEES (all taxes included)

Two different leagues are being offered this year so be carefull which one you check off.

Men and Women's Indoor Soccer to be held in the Louis Riel Dome on Friday Nights between 6PM and 10PM - \$300 for app. 27 sessions.

Women's FUTSAL Indoor Soccer to be held at Louise Riel HS on Monday Nights - \$120 for app. 16 sessions.

NO POST DATED CHEQUES - Women Dome Soccer Players must be at least 25 this year or older. Men Dome Soccer Players and FUTSAL Soccer Players must be 16 this year or older. (Questions about the Adult program email - Jessica - adulddirector@cumberlandsoccer.com)

Note: NSF cheques are subject to a \$25 admin fee and must be replaced with a certified cheque or money order within 7 days.

Note: Blue and white uniforms are not included in the fees but are **MANDATORY** as are shin pads and non marking type shoes when in GYMS.

WITHDRAWALS

See Withdrawal and Refund policy on the website for details.

All requests to withdraw must be in writing to admin@cumberlandsoccer.com or you can drop off written notification at the office.

ACKNOWLEDGEMENT

I acknowledge that this information is accurate, that I have read this registration agreement in its entirety and that I have executed this registration agreement voluntarily. **Note:** Registrations cannot be accepted without both pages including the Consent for Use of Personal Information, Acceptance of Terms and Conditions and the OSA Waiver/Release Agreement all fully signed on page 2.

\$_____ - Total Payable Cheque Debit (at office only) Money Order (Payable to: Cumberland Soccer)

Signature of Participant

_____-_____-_____
Date (YYYY - MM - DD)

PLAYING HISTORY

Warning: This Section MUST be completed – Any person who provides false information or withholds any of the required information will be suspended from all Ontario Soccer Association activities for one year.

- With which Club did the player last register? _____
- In which country did the player last register? _____
- In which year did the player last register? _____

Has the player **ever** registered to play soccer in another country? NO Yes **If YES, answer the following questions:**

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

CONSTENT FOR USE OF PERSONAL INFORMATION

I authorize the Ontario Soccer Association, the Eastern Ontario District Soccer Association, and the Cumberland United - Unis Soccer Club to collect and use personal information about me for the following purpose of receiving communications from the Ontario Soccer Association, District Association, Club and League. **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: Attention of the OSA Privacy Officer, The Ontario Soccer Association, 7601 Martin Grove Road, Vaughan ON 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, Eastern Ontario Soccer Association and Cumberland United-Unis Soccer 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, The Eastern Ontario District Soccer Association, The Cumberland United-Unis Soccer Club and 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.

Name of Participant (please PRINT)

Signature of Participant

Date (YYYY - MM - DD)

ONTARIO SOCCER ASSOCIATION – WAIVER AND RELEASE OF LIABILITY

(To be signed by participants 18 yrs of age and older)

By signing this form you give up important legal rights. Please read carefully! This is a binding legal agreement. As a Participant in the programs, activities and events of the Ontario Soccer Association, Eastern Ontario District Soccer Association, and Cumberland Unite-Unis Soccer Club, the undersigned acknowledges and agrees to the following terms.

Disclaimer: The Ontario Soccer Association, Districts, Leagues and Clubs, their directors, officers, members, employees, coaches, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities, and representatives (the "Organization") are not responsible for any injury, damage or loss of any kind suffered by a Participant during, or as a result of, any program, activity or event, caused in any manner whatsoever including, but not limited to, the negligence of the Organization.

Description of Risks: 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 soccer. The risks and hazards of soccer 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 an integral part of the organization's activities.

Furthermore: I am aware: That injuries sustained in soccer can be severe; that I may come into close contact with other participants, including the possibility of accidental and unexpected contact; That I may experience anxiety while challenging myself during the activities; That my risk of injury is reduced if I follow all rules adopted during training; and That my risk of injury increases as I become fatigued.

Release of Liability: In consideration of the Organization allowing me to participate, I agree: To assume all risks arising out of, associated with or related to my participation; To be solely responsible for any injury, loss or damage that I might sustain while participating; and To release the Organization from liability for any and all claims, demands, actions and costs that might arise out of my participating, even though such risks, injuries, loss, damage, claims, demands, actions or costs may have been caused by the negligence of the Organization.

Acknowledgement: I acknowledge that I have read this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, executors, administrators and representatives.

Name of Participant (please PRINT)

Signature of Participant

Date (YYYY - MM - DD)