

Vaughan Women Soccer (Vaughan Soccer Club)
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PLAYER REGISTRATION FORM - Vaughan Women Soccer Fall INDOOR REGISTRATION FORM 2020-2021

Open age 18+ **Wednesday** nights 7 V 7 DOUBLE FIELD
All games played at Vaughan Sportsplex 2
8301 Keele St. Vaughan, Ontario
Turf or Indoor Shoes only, no outdoor cleats permitted
Session begins: Wednesday October 7, 2020
15 weeks guaranteed including playoffs

SURNAME _____

FIRST NAME _____ EMAIL: _____

STREET ADDRESS _____

CITY _____ PROV. _____ POSTAL CODE _____

PHONE # () _____ BUS # () _____

GENDER: M ___ F ___

DATE OF BIRTH (DD/MM/YY) ____/____/____

Age in 2020 _____

NAME OF LAST SOCCER CLUB _____ team name or team captain if applicable: _____

EXPERIENCE (YRS): _____ Field position preferred: _____

REGISTRATION FEES: Individual \$225.00 per session (includes ref and osa fees)

TERMS AND CONDITIONS

- The Vaughan Soccer Club (V.S.C.) will attempt to accommodate every interested player. However, places will be limited and acceptance of every registration cannot be guaranteed.
- Players are responsible for insuring that they wear protective shin guards and is in good health and holds sufficient medical coverage (e.g. 24 hr/day) full year.
- Players agree that the V.S.C. or any of its teams or other officials will not be held responsible for any injury or accident during games or practices or while on route to games or practices.
- **\$40.00 on all NSF cheques.**
- There are **no refunds** after October 5, 2020 . \$35.00 ADMIN FEE APPLIED TO ANY REFUNDS
- This registration cannot be accepted unless the Player signs it.
- **I agree to digitally sign declaration of Compliance – Covid-19, Informed consent and assumption of risk agreement and Release of Liability, waiver of claims.**

I HAVE READ AND ACCEPT THE ABOVE TERMS AND CONDITIONS AS WELL AS THE TWO PAGES ATTACHED TO THIS FORM REGARDING OSA WAIVER AND LIABILITY. I CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT AND COMPLETE.

Also, I agree to abide by the Published Rules of The Ontario Soccer Association (OSA), York Region Soccer Association (YRSA) and the Vaughan Soccer Club Inc. (VSC).

Player Signature _____ DATE: _____

Note: A Waiver/Participation Agreement must be signed for this application to be valid.

ONTARIO SOCCER ASSOCIATION

WAIVER AND RELEASE OF LIABILITY (To be signed by participants 18 yrs of age and older)

This is a binding legal agreement. As a Participant in the programs, activities and events of the Ontario Soccer Association, York Region Soccer Association, Leagues and Vaughan Soccer Club Inc., the undersigned acknowledges and agrees to the following terms.

Accident Insurance

Executing this agreement will not preclude you from accident insurance coverage, subject to the terms and conditions of The Ontario Soccer Association's insurance policy.

Disclaimer

The Ontario Soccer Association, their Districts, Leagues and Clubs, 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 as a Participant 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;
- Dryland training including weights, running, and massage;
- Grass, turf and other surfaces including bacterial infections and rashes;
- Falls to the ground due to uneven or irregular terrain or surfaces;
- Collisions with walls and soccer equipment;
- 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;
- Extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
- Contact, colliding or being struck by other participants, spectators, equipment or vehicles;
- Vigorous physical exertion and strenuous cardiovascular workouts;

- 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 as a Participant, I agree:

- a) To assume all risks arising out of, associated with or related to my participation;
- b) To be solely responsible for any injury, loss or damage that I might sustain while participating; and
- c) 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.

I acknowledge that I have read this registration agreement in its entirety and that I have executed this registration agreement voluntarily.

Print name of Participant

Signature of Participant

Date