EAST FERRIS & CALLANDER

RECREATIONAL YOUTH SOCCER
PLAYER REGISTRATION FORM 2022 SEASON

- Registration is $75.00, $70.00 for each additional child in the same family.
- Cheques can be made payable to:
  The Municipality of East Ferris or **The Municipality of Callander**

Payments and Registrations can be dropped off at the following locations in your home community:

East Ferris Community Centre
1267 Village Rd, Astorville **(Cheque ONLY)** ***Drop Box Available**
FOR MORE INFORMATION 705-752-3566

Callander Municipal Office
280 Main St N, Callander **(Cash, Cheque or Debit)**
FOR MORE INFORMATION 705-752-1410 ext.0

Municipality of East Ferris Office
390 Hwy 94, Corbeil **(Cash, Cheque or Debit)**

Callander Public Library
30 Catherine St W, Callander **(Cheque ONLY)**

East Ferris Public Library
1257 Village Rd, Astorville **(Cheque ONLY)**

DEADLINE FOR REGISTRATIONS FRIDAY MAY 13th, 2022

PLAYER INFORMATION:

PLAYER FULL NAME: _____
DATE OF BIRTH: DD/MM/YY _____ AGE (at beginning of June): _____
ADDRESS: _____
CITY: _____ PROVINCE: _____ POSTAL CODE: _____

PARENT/GUARDIAN INFORMATION:

FULL NAME: _____
RELATIONSHIP TO CHILD: _____
ADDRESS: _____
CITY: _____ PROVINCE: _____ POSTAL CODE: _____
PRIMARY PHONE #: ( ) _____ SECONDARY PHONE #: ( ) _____
EMAIL ADDRESS: _____

EMERGENCY CONTACT INFORMATION:

FULL NAME: _____
RELATIONSHIP TO CHILD: _____
ADDRESS: _____
CITY: _____ PROVINCE: _____ POSTAL CODE: _____
PRIMARY PHONE #: ( ) _____ SECONDARY PHONE #: ( ) _____
EMAIL ADDRESS: _____

PLAYER SELECTION:

Each player can select one other player (including siblings) to play on the same team. **ONE REQUEST PER CHILD**

FULL NAME OF CHILD: _____

COACHES ARE ALWAYS NEEDED- THIS PROGRAM CANNOT RUN WITHOUT THEM!

If you are interested in coaching or assisting please fill out the following:

FULL NAME: _____ PHONE #: _____ EMAIL: _____

WAIVER AND RELEASE OF LIABILITY/ACCEPTANCE OF TERMS AND CONDITIONS:

There is a potential risk of injury in training and participating in any sport. We have done our best to create a safe environment. The coach(es) has/have established rules for participation and for proper conduct on the field and they must be followed.

By signing this document, you will waive certain legal rights, PLEASE READ CAREFULLY.
IN CONSIDERATION of allowing my minor child(ren)/ward to participate in the programs, activities and events of The Municipalities of East Ferris and Callander's Recreational Youth Soccer **League**, I ASSURE TO YOU THAT:

1. I am the parent/guardian of the **above-named** participant(s) having full legal responsibility for decisions regarding the **above-named** participant(s).
2. I believe that my child(ren)/ward is physically, **emotionally,** and mentally able to participate in the programs, activities and events of East Ferris and Callander Recreational Soccer.
3. I hereby acknowledge that I am aware of the risks and hazards associated with or related to soccer. The risks and hazards include, but are not limited to injuries from:
   a. Executing strenuous and demanding physical techniques in **soccer.**
   b. Dry land training including weights, running and **massage.**
   c. Grass, **turf,** and other surfaces including bacterial infections and **rashes.**
   d. Falls to the ground due to uneven or irregular terrain or **surfaces.**
   e. Collisions with walls and soccer **equipment.**
   f. Failure to properly use any piece of equipment or from the mechanical failure of any piece of **equipment.**
   g. Extreme weather conditions which may result in heatstroke, **sunstroke,** or **hypothermia.**
   h. Contact, colliding or being struck by other participants, spectators, **equipment,** or **vehicles.**
   i. Vigorous physical exertion and strenuous cardiovascular **workouts.**
   j. Exerting and stretching various muscle groups; and
   k. Travel to and from competitive events and associated non-competitive events, which are an integral part of the organization's activities.
4. Furthermore, I am aware that my child(ren)/ward may:
   a. Sustain injuries in soccer that can be severe, cause spinal cord injuries and even be **fatal.**
   b. Experience anxiety while challenging himself/herself during the activities, **events,** and **programs.**
   c. Come into close contact with other participants, including the possibility of accidental and unexpected **contact.**
   d. Risk of injury is reduced if he/she follows all rules established for participation; and
   e. Risk of injury increases as he/she become fatigued.
5. In case of emergency, I authorize trained first responders to provide **treatment,** as necessary.
6. Refund Policy
   a. There is a $25 administration fee on all registration refunds. If a uniform has been provided it must be returned or an additional $25 charge will apply. **After June 24th, 2022, NO REFUNDS.**

I UNDERSTAND AND AGREE on behalf of myself, my heirs, assigns, personal representatives and next of kin that my signing of this document constitutes:

7. I am registering my child(ren)/ward willingly and my child(ren)/ward is participating voluntarily in these activities, events, and programs.
8. I agree that there are risks in soccer as described above and my child(ren)/ward will be exposed to these risks and hazards.
9. I agree to accept all these risks and hazards and be responsible for any injury or other loss, which my minor child(ren)/ward might receive while participating in these events, activities, and programs.
10. If something happens to my child(ren)/ward, I release the Organizers of responsibility for any claims, demands, actions and costs, which might arise out of my child/ward's participation. I understand "Organizers" to mean: East Ferris and Callander soccer participants, sponsors, volunteers, The Municipalities of East Ferris and Callander, officials and facility owners.

I ACKNOWLEDGE MAKING THIS AGREEMENT
By signing and dating below, you agree that you are the parent or legal guardian of the player(s) being registered and to be bound by this Legal Agreement even if you have not read the agreement.

AGREEMENT:
I agree to abide by the published rules of the Ontario Soccer Association, and the East Ferris & Callander Youth Soccer Club.

_____	_____	_____
Printed Name of Parent/ Guardian	Signature of Parent/Guardian	Date