



# Summer Day Camp Registration Form - 2009

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

Please write your e-mail clearly. If you do not have e-mail, please attach a stamped addressed envelope to ensure you receive your confirmation.

**Birth Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
                  D   M   Y

**Gender :** M / F

**Playing History:**

**Years Played:** \_\_\_\_\_ **Highest Level Played (House/Rep/Select):** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone :** \_\_\_\_\_

YOB	Boys	Girls
2002	Mon Jul 20 or Thu Aug 6	Tue Jul 28 or Fri Aug 14
2001	Fri Jul 17 or Wed Aug 5	Mon Jul 27 or Thu Aug 13
2000	Thu Jul 16 or Tue Aug 4	Fri Jul 24 or Wed Aug 12
1999	Wed Jul 15 or Fri Jul 31	Thu Jul 23 or Tue Aug 11
1998	Tue Jul 14 or Thu Jul 30	Wed Jul 22 or Mon Aug 10
1997	Mon Jul 13 or Wed Jul 29	Tue Jul 21 or Fri Aug 7

**First Choice Date** \_\_\_\_\_

**Second Choice Date** \_\_\_\_\_

DISC's FIFA approved turf works with cleats or flat soled shoes. **Shinguards are mandatory !**

WAIVER : There is a potential risk attached to any sport. I agree that Durham Indoor Soccer Centre Ltd. ("the Centre") and its executive, employees, authorized agents, referees, coaches and volunteers will not be held responsible for any loss or damages, injury or accident, however caused, and to release them from all claims which may arise as a result of any use of the Centre , including, but not limited to, practices, games, tournaments, travel to and from locations. I agree that the Centre or any authorized representative acting on its behalf may seek emergency medical assistance for me or my child if deemed necessary. The Centre has established rules for participation and proper conduct on or about the playing field. I agree to abide by the published rules of the Centre. I understand that DISC uses electronic video technology to record games for resolving disciplinary matters and grant permission to DISC to make and hold such recordings.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Mail To:** Durham Indoor Soccer Ltd, c/o 1289 Terwillegar Ave Oshawa L1J 7A4  
**Tel:** 905 436 6921   **Fax:** 905 436 7759  
**E-mail:** [DurhamIndoorSoccer@rogers.com](mailto:DurhamIndoorSoccer@rogers.com)   **Web:** [www.durhamindoorsoccer.com](http://www.durhamindoorsoccer.com)