



DISC Fall 2010 O35 Recreational Registration Form

PERSONAL INFORMATION

| | | | |
|---------------|--|------------------|-------------------------|
| Full Name*: | _____ | _____ | _____ |
| | <i>Last</i> | <i>First</i> | <i>M.I.</i> |
| Address*: | _____ | | _____ |
| | <i>Street Address</i> | | <i>Apartment/Unit #</i> |
| | _____ | _____ | _____ |
| | <i>City</i> | <i>Province</i> | <i>Postal Code</i> |
| Home Phone *: | () _____ | Alternate Phone: | () _____ |
| Fax Number: | _____ | E-mail Address*: | _____ |
| Birth Date*: | Proof of Birthdate: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Old Card <input type="checkbox"/> Other | | |
| | New players to DISC must attach a copy of their proof of birthdate. | | |
| | DISC primarily uses e-mail to stay in touch with players. Please print your e-mail address clearly. If you do not have an e-mail address, please attach a stamped, self-addressed envelope so that we can send you a schedule/roster before the start of the season. Please provide a photocopy of your proof of birthdate. | | |
| | * Required Fields For All Players | | |

TEAM DETAILS To Be Completed By DISC Unless Adult Entering As Part of Team, Enter Team Name

DISC Fall 10

CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Durham Indoor Soccer Centre to collect and use personal information about me or my child/ward for the purpose of receiving communications from the Durham Indoor Soccer Centre.
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 DISC Privacy Officer at disc@rogers.com or by mail to: **Attention of the DISC Privacy Officer, Durham Indoor Soccer Centre, 1289 Terwilligar Ave, Oshawa Ontario L1J 7A4.**
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 Durham indoor Soccer Centre, 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 Durham Indoor Soccer Centre'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 Durham Indoor Soccer Centre's 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.

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

DURHAM INDOOR SOCCER CENTRE

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 Durham Indoor Soccer Centre, the undersigned acknowledges and agrees to the following terms.

Disclaimer

The Durham Indoor Soccer Centre, its 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 dryland 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:

- 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.

Name of Participant

Date

Signature of Participant

| Fee Table | |
|-----------|-------|
| Type | Fee |
| <Sep 15th | \$145 |
| >Sep 15th | \$165 |
| | |

Fees & Payment

Registrations with incorrect fees will not be processed.

Fees include GST, regn fee, field rental. Cheques should be made payable to "Durham Indoor Soccer Centre Ltd" NSF Fee \$25

| | |
|---|------------------------------------|
| TOTAL PAID : \$ _____ | CASH / CHEQUE / CREDIT CARD |
| OFFICE USE : Cheque No: _____ | Deposit Date: _____ |
| Mail To: Durham Indoor Soccer Ltd, 1289 Terwilligar Ave, Oshawa L1J 7A4 | |

E-mail: durhamindoorsoccer@rogers.com

Web: www.durhamindoorsoccer.com

Tel 905 436 6921

Fax 905 436 7759

Credit Card Payment

Name On Card..... Type Of Card: Visa Mastercard
 Number On Card..... Exp Date.....
 Billing Address.....

I authorise DISC to charge my account playing fees for the Fall session and understand that there are no refunds after 30 days before season start except on medical grounds. Any refunds will be made on a pro-rated basis less \$25 admin fees. Registrations by credit card may be faxed, e-mailed or mailed to DISC.