

# PLAYER

Registration Form



## Tecumseh Soccer Club

Box 234, 13300 Tecumseh Rd East  
Tecumseh, ON, N8N 4R8



### Player Information

Full Name: \_\_\_\_\_ Sex : M  F

Date of Birth: \_\_\_\_\_ Proof of Age: Birth Certificate  Other

OSA No. \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* *Province* *Postal Code*

Home Phone: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Cell Phone #1: \_\_\_\_\_ Cell Phone #2: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
*Last* *First*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #* *City*

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

### Team Details

Season Type and Player Classification: \_\_\_\_\_ Outdoor  \_\_\_\_\_ Indoor

Club Name: Tecumseh Soccer Club

Registration Number: CD - \_\_\_\_ - \_\_\_\_

Team Name: \_\_\_\_\_

Registration Number: TD - \_\_\_\_\_ - \_\_\_\_

League Name: \_\_\_\_\_

Registration Number: L\_\_ - \_\_\_\_\_ - \_\_\_\_

Division Name: \_\_\_\_\_

Registration Number: D \_\_ - \_\_\_\_\_

### Playing History

*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? \_\_\_\_\_

In which province and country did the player last register? \_\_\_\_\_ In which year? \_\_\_\_\_

Has the player **ever** registered to play soccer in another country? \_\_\_\_\_

If Yes, answer the following questions:

In which country (other than Canada) did you last register? \_\_\_\_\_

With which Club did last register in another country? \_\_\_\_\_

In which year did you last register in another country? \_\_\_\_\_

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## Tecumseh Soccer Club

13300 Tecumseh Rd East  
Tecumseh, ON



### Consent for Use of Personal Information

I authorise The Ontario Soccer Association (OSA) and the Tecumseh Soccer Club (TSC) to collect and use personal information about me, my child/ward, including name, address, e-mail address, telephone number, cell phone number, sex, age, date of birth, medical history (optional) and any other additional information required by the OSA & TSC for its own needs for the following purposes:

- a) Receiving communications from The OSA & the TSC;
- b) Receiving information from The OSA & TSC's sponsors;
- c) Ensuring appropriate age group and category;
- d) Determining eligibility;
- e) Media relations and publishing sports information;
- f) In the case of medical emergencies;
- g) Determining membership demographics and program wants and needs;
- h) Player Identification/Recruitment; and
- i) Posting rosters, statistics, images and results on website of The OSA and/or TSC.

I also authorise The OSA & TSC to disclose my, my child's/ward's personal Information to the Canadian Soccer Association, District Association, Leagues and Tournament Host Organisations for the purpose of annual demographic reporting, registration, posting competition information, organisational needs and to communicate with registrants about soccer programs, events and activities; OSA's computerised registration system.

### Acceptance of Terms and Conditions

In consideration of the acceptance of my membership in The OSA and the TSC, I, the participant and parent/guardian if under 18, agree as follows:

- I understand that I cannot play in any sanctioned soccer game until this registration form has been validated and the registration data has been entered in The OSA's computerised registration system.
- I have reviewed the waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement.
- To abide by the published rules of The OSA, the TSC and my league.
- I am aware of The OSA's and ECSA's published rules and agree to be bound by them.
- I am sole responsibility for my/child/ward personal possessions and athletic equipment.
- I accept liability for any damage to the playing equipment caused by my careless, negligent and/or improper handling.
- **The TSC does not provide refunds except in extreme circumstance.**

### Acknowledgement

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

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent /Guardian (if under 18)

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

#### Club Use Only:

Payment Method: \_\_\_\_\_

Amount 1st: \_\_\_\_\_

Amount 3rd: \_\_\_\_\_

Amount 2nd: \_\_\_\_\_

Amount 4th: \_\_\_\_\_

Club Official: \_\_\_\_\_