



PYSC Over 18 COACH REGISTRATION

Outdoor Youth Recreational

Age of team to be coached _____

705 743 0482

Name _____ Gender (M/F) _____
First Middle (I) Last Name

OSA Registration # _____ Date of Birth ____/____/____
Filled in by Club Year mmm dd

Address: _____ Ontario _____
Street Address Apartment/Unit # City Postal Code

Home Phone: () _____ Business Phone: _____ Cell Number: () _____ E-mail: _____

CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Canadian Soccer Association, Ontario Soccer Association, ECOSA, and PYSC to collect and use personal information about my child/ward for the purpose of receiving communications from the Canadian Soccer Association, Ontario Soccer Association, ECOSA, and PYSC.

I understand that I may withdraw such consent related to receiving communications at any time by contacting the OSA Privacy Officer at OSAPrivacyOfficer@soccer.on.ca or by mail to: Attention: OSA Privacy Officer, Ontario Soccer Association, 7601 Martin Grove Road, Vaughan ON L4L 9E4. The Privacy Officer will advise the implications of such withdrawal.

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 Ontario Soccer Association, East Central Soccer Association and the PYSC, I, the participant agree as follows:

1. I understand that I cannot coach in any sanctioned soccer game until after this registration form has been validated and the registration data has been entered in The Ontario Soccer Association's computerized registration system.
2. I have reviewed the waiver attached and my signature affixed hereto indicates my agreement with such waiver
3. I am aware of The Ontario Soccer Association, ECOSA, and PYSC bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
4. I accept sole responsibility for my possessions and athletic equipment.
5. I accept all liability for any damage to the coaching equipment caused by me or my careless, negligent and/or improper handling.

By signing and dating below you agree that you are the coach being registered and to be bound by this Legal Agreement even if you have not read this agreement. Please also read and sign page 2 of this form.

_____/_____/____/____ **Also Sign Page 2** _____
Name of Coach (print) Signature of Coach Date

For use by CLUB REGISTRAR

SIGNATURE _____

Date _____

For use by District Association

SIGNATURE _____

Date _____

Check with Club Administrator to determine whether a police record check is required.

Date of Police Records Check ____/____/____ Witnessed by PYSC Rep _____ Date: _____
Year MM DD

The Police Records Check applies to me.

Signature of Coach _____ Date: _____

Accepted by PYSC Not Accepted by PYSC

Note: PYSC must retain copy of the coach registration form and submit form to ECOSA or the OSA upon request.

ONTARIO SOCCER ASSOCIATION

WAIVER AND RELEASE OF LIABILITY

By signing this form you give up important legal rights. Please read carefully!

1. This is a binding legal agreement. As a Participant in the programs, activities and events of the Ontario Soccer Association, their Districts, Leagues and Clubs, the undersigned acknowledges and agrees to the following terms.

Disclaimer

2. 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

3. 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.

4. 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

5. 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.

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.

Acknowledgement

By signing and dating below you agree that you are the coach being registered and to be bound by this Legal Agreement even if you have not read this agreement.

Name of Participant

Signature of Participant

Date

**You can mail REGISTRATION FORM to:
PETERBOROUGH YOUTH SOCCER CLUB, P.O. Box 133, Peterborough, Ont. K9J 6Y5**