



# Unionville-Milliken Soccer Club

Mailing Address: 4721 Highway 7, P.O.Box 64548, Unionville, Ont., L3R 0M9

Office Address: 7700 Kennedy Rd, Unionville, Ont., L3R 9S5

Bus: 905-477-KICK (5425) Fax: 905-477-6772 Web: [www.u-msc.com](http://www.u-msc.com)

E-mail: [adultsoccer@u-msc.com](mailto:adultsoccer@u-msc.com)

ON - LINE Registration Available Register On-Line at [www.u-msc.com](http://www.u-msc.com)

- Please indicate level preferred
- MEN's OPEN
  - MEN's OVER 30
  - WOMEN'S OPEN

For Office Use Only	
<input type="checkbox"/> Community Center	<input type="checkbox"/> Mailed
<input type="checkbox"/> Registration Event	<input type="checkbox"/> Faxed
<input type="checkbox"/> Library	<input type="checkbox"/> Drop-in

## ADULT RECREATIONAL LEAGUE REGISTRATION

Last Name (Family Name)		First Name (Given Name)		Gender	
<input type="text"/>		<input type="text"/>		<input type="checkbox"/> Male <input type="checkbox"/> Female	
Street Address			Apt #		
<input type="text"/>			<input type="text"/>		
City		Postal Code		Date of Birth	
<input type="text"/>		<input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/> DAY MONTH YEAR	
Home Phone Number					
<input type="text"/>					
Business Phone Number			Mobile Phone Number		
<input type="text"/>			<input type="text"/>		
E-Mail Address					
<input type="text"/>					
Please Choose one from below:					
<input type="checkbox"/> ADULT	# of years	<input type="text"/>	Year last registered?	<input type="text"/>	
<input type="checkbox"/> INDOOR	In which Club?	<input type="text"/>			
<i>If registered in a similar program with a Club other than UMSC in the past year, the by signing this form the registrand certifies that the registrand has not been induced by any offer of reward or advantage to participate in the UMSC program in the current year.</i>					
<input type="checkbox"/> OUTDOOR					
PLAYER OR TEAM PREFERENCE _____					

Club ID: <b>2710</b>
<input type="text"/>
UMSC Player ID
<input type="text"/>
OSA Player ID
Amt Paid: <input type="text"/>
VISA/DR/MC <input type="checkbox"/>
<input type="text"/>
CASH <input type="checkbox"/>
Cheque <input type="checkbox"/>
Cheque # <input type="text"/>
<input type="text"/>
Registration Handled By:
<input type="text"/>
Registrar's Signature
<input type="text"/>
NSF

The UMSC is run by Volunteers. Please indicate below how you can help.

- SPONSOR
- COACH
- ASSISTANT COACH
- CONVENOR
- VOLUNTEER

NAME:

PHONE NUMBER:

Please READ and SIGN on BACK of this form for REGISTRATION to be ACCEPTED!

## UNIONVILLE-MILLIKEN SOCCER CLUB - CONDITIONS OF REGISTRATION

- a) The UMSC is a private club. This application may or may not be accepted at the discretion of the Board of Directors
- b) Registration in this specialized league may not include some rights that may effect participation in certain general membership meetings
- c) **Ladies League only. We will do our best to accommodate special requests. Please clearly indicate at the bottom of this form any special requests that you would like considered. However we cannot guarantee the request will be approved.**

### PROOF OF AGE

Please provide a copy of Birth Certificate or Drivers Licence at time of registering

### REFUND POLICY

**"Request for Refund" forms at the club office must be completed to get a refund. No refunds are issued after uniforms distribution to teams. There is a non-refundable handling charge of \$25 for each player.**

### WARNING: CAUTIONARY NOTICE AND WAIVER OF LIABILITY

The Registration Applicant (Applicant) acknowledges that though the Unionville-Milliken Soccer Club (UMSC) has taken reasonable measures to ensure a safe environment, the Applicant bears the responsibility to assess and assume the risk of participating in UMSC programs as follows:

- a) Soccer is a sport that may involve voluntary and involuntary rough play and competition exposing participants to risk of serious injury (injury) and loss or damage direct or indirect, economic, personal or consequential (damage).
- b) Participation in UMSC programs may include the risk of contact by participants with allergens, pathogens, or other substances harmful to the participant due to pre-existing medical conditions including allergies, asthma and epilepsy, avoidance of which the treatment of which is solely the responsibility of the Applicant.

The Applicant acknowledges that the UMSC, or its Executive, Directors, Officers, Agents and Employees, Officials, Referees, Coaches, Assistant Coaches, Convenors and Volunteers (UMSC Staff) take no responsibility for injury or damage, risk of which is assumed solely by the Applicant however caused, whether by tortious, deliberate or negligent conduct of the participant, spectators, bystanders, or UMSC Staff, and the Applicant further saves harmless and indemnifies UMSC Staff from any claim for compensation for damage, including claims or suits arising from injury or damage suffered by the participant or other persons however caused.

The Applicant shall abide by UMSC policy of zero tolerance of verbal or physical abuse of UMSC Staff & Referees. Violation may result in expulsion from UMSC events or programs.

The Applicant agrees to review and abide by the rules of the UMSC, and as appropriate by the rules of all affiliated bodies including but not limited to the Ontario Soccer Association, York Region Soccer Association, York Region Soccer League, the Ontario Youth Soccer League, the Central Soccer League, the Central Girls Soccer League and the Ontario Indoor Soccer League and to assume responsibility to seek out and review the rules set out on the web sites of the aforesaid organizations.

### PERSONAL INFORMATION PROTECTION

Completion of this form constitutes the undersigned's consent and acknowledgement that the UMSC must collect such personal information as is required to complete this registration form for the following purposes:

- \* To constitute soccer teams according to age, gender, physical and skill criteria;
- \* To provide for volunteer staff for coaching and administrative purposes;
- \* To register players for informational and insurance purposes with the Ontario Soccer Association (OSA) and various leagues in which UMSC players may participate, and to have players assigned an OSA registrant number.
- \* To comply with tournament requirements, where in addition to the registration information herein, player photos will be required and submitted for review by league and tournament officials;
- \* To constitute and maintain a list of club members, for contact by the UMSC from time to time for the distribution of information by telephone, e-mail and mail including registration forms and club information;
- \* Information collected will be stored for the shorter of up to ten years, or specific request for deletion by a registrant, and available for correction or review by contacting the UMSC at 905-477-5425

#### **I, the Undersigned, certify as follows:**

I understand the Conditions of Registration and Warning and the Personal Information Protection statement set out above;

I acknowledge that Team balancing will take place;

I acknowledge the Club's decision regarding placement and transfer of players is final, and not a valid grounds for fee refund;

I have not been induced by the UMSC, its officers, directors, employees, volunteers or any third parties to submit this registration.

I certify that I have read and agree to the conditions, as stated above and that I have read the Ontario Soccer Association Registration Rules. I certify that all the information provided by me on this registration form is correct.

By signing below, I agree to abide by the published rules of the Canadian Soccer Association (CSA), the Ontario Soccer Association (OSA), the York Region Soccer Association (YRSA) and the Unionville-Milliken Soccer Club including the Zero Tolerance Program established by the Unionville-Milliken Soccer Club.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please Print Name: \_\_\_\_\_

I understand as a registrant of the Ontario Soccer Association, my District Association, my League, and my Club that I may receive information from time to time related to soccer events, programs and services. Please check this box if you prefer to be excluded from receiving this information.