



**Youth Development Programs / Programme Français Orléans**

**PLAYER REGISTRATION FORM - Year 2011/2012 Année - FORMULAIRE D'INSCRIPTION DU JOUEUR**

FIRST NAME - PRÉNOM	FAMILY NAME - NOM DE FAMILLE	BIRTH DATE - DATE DE NAISSANCE Day/Jour   Mon/Mois   Year/Année	SEX - SEXE Male <input type="checkbox"/> Fem <input type="checkbox"/>	OSA REGISTRANT NO (if known)
ADDRESS - ADRESSE		CITY - VILLE	POSTAL CODE POSTAL	TELEPHONE (HOME - DOMICILE)
NAME OF PARENTS/GUARDIAN - NOM DES PARENTS/TUTEUR (for players under 18 - pour les joueurs sous 18)		E-MAIL ADDRESS (in Capital letters) - ADRESSE POUR LE COURRIER ÉLECTRONIQUE (en majuscules)		TELEPHONE (WORK - TRAVAIL)
				FAX

**ATTENTION: This Section MUST be completed** – Any person who provides false information or withholds any of the required information will be suspended from all Ontario Soccer Association activities for 1 year.

Club last registered with - Dernier club que vous avez joué: \_\_\_\_\_ Year - Année \_\_\_\_\_ Age U \_\_\_\_\_ Division/Level \_\_\_\_\_ Position \_\_\_\_\_

Has the player **ever** registered to play soccer in another country? \_\_\_ Yes \_\_\_ NO If Yes, in which country (other than Canada) and Club did you last register? \_\_\_\_\_

**Registration is to include - L'inscription doit inclure:**

- Registration Fee - Frais d'inscription \_\_\_\_\_ Cheque(s) attached in the amount of \$ \_\_\_\_\_  
\* 10% reduction for the second and all subsequent youth players from the same family unit

**Make all cheques payable to "Capital United Soccer Club"**  
**Mail Registration and payment: P.O. BOX 59054, 1559 Alta Vista Drive, Ottawa, Ont, K1G-5T7**  
**E-mail: info@fccapitalunited.com, tel# 613-695-2832 (CUFC), WWW.FCCAPITALUNITED.COM**

**Year 2011/12 Soccer Fees - Les frais pour l'année 2011/12**

**Youth Development Program - Ages 4 to/à 11 - Programme pour le perfectionnement**

- > Summer Youth League (May - Sept): 4-5 years old - 1 session/week, Cost: \$110;
- > Summer Youth League (May - Sept): 6-11 year old - 2 sessions/week, Cost:\$160;
- > Programme Français à Orléans (Mai-Sept): 4-11 ans - 1 session par semaine, Coût: \$110
- > One Week Summer Camp; 4-5 years old - half days / cost \$99, 6-11 years old - full day / cost \$150  
9am to 4pm with early drop-off (8:30am), late pick-up (4:30pm), recreational swimming in the afternoon (additional \$5 daily)  
Weekly during the month of July > Gloucester High School / Trillium Park
- > Winter Development Program at the Dome - \$175 (Nov to Mar - 1 Session / week)

**CONSENT FOR USE OF PERSONAL INFORMATION** - I authorize the Ontario Soccer Association, Eastern Ontario District Soccer Association and Capital United Soccer Club to collect and use personal information about me or my child/ward for the following purposes: a) Receiving communications from the Ontario Soccer Association, District Association, Club and League; b) Determining appropriate age group, player classification and eligibility; c) Player identification and recruitment. I also authorize the Ontario Soccer Association, District Association and Club to disclose my or my child's/ward's personal information to the Canadian Soccer Association, the League in which I or my child/ward plays, and all Tournament Host Organizations for the purpose of registration and to communicate with registrants about soccer programs, events and activities; ITS Sportsnet; and a third party agent to solely facilitate direct mailings and for no other purpose. 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 OSA Privacy Officer at **OSAPrivacyOfficer@soccer.con.ca** or by mail to: Attention of the OSA Privacy Officer, The Ontario Soccer Association, 7601 Martin Grove Road, Vaughan ON L4L 9E4.

**\*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, Eastern Ontario District Soccer Association and Capital United Soccer Club, I, the participant and parent/guardian (if participant is under 18 years of age), agree as follows:

- 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 The Ontario Soccer Association's computerized registration system.
- I have reviewed the waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement.
- I am aware of The Ontario Soccer Association, Eastern Ontario District Soccer Association, Capital United Soccer Club and League bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
- I accept sole responsibility for my or my child/ward's personal possessions and athletic equipment.
- 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 Player/Joueur:** \_\_\_\_\_ **Signature of Parent/Tuteur (if under 18):** \_\_\_\_\_

<b>This portion of the form is to be completed by the Team Coach and Club Registrar</b>		<b>PLAYER CLASSIFICATION - (Check 1 box at right)</b>	
Club Registration Number: CD 0704		<input type="checkbox"/> YDP Summer Youth League (4-5), \$110	
Club Name: CAPITAL United Soccer Club		<input type="checkbox"/> YDP Summer Youth League (6-11), \$160	
Team Registration Number: TD 0704	TEAM NAME: _____	<input type="checkbox"/> Programme Français Orléans (4-11), \$110	
League Registration Number: LD 0701	League Name: OCSL SSSL CU Youth League	<input type="checkbox"/> Summer Camp (4-5), \$99 (indicate week)	
Division Registration Number: DL 000704	Division Name: Eastern Ontario District Soccer Association	<input type="checkbox"/> Summer Camp (6-11), \$150 (indicate week)	
Signature of CAPITAL United Soccer Club Registrar	Date: _____	<input type="checkbox"/> Winter YDP (U4-U11) at the Dome, \$175	
	Entered in LCR: <input type="checkbox"/>		