



# Halifax Dunbrack Soccer

## Newcomers Program Registration Form

<b>Office Use Only</b>	Receipt Electronic <input type="checkbox"/> Paper <input type="checkbox"/>	Payment Method Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Cheque # _____	<b>Total Reg Amount: \$</b>
Processed By:			

Player Surname		Date of Birth (YYYY-MM-DD)	
Player First Name		Identified Gender	<input type="checkbox"/> M <input type="checkbox"/> F

	Parent/Guardian #1	Parent/Guardian #2
Parent Surname		
Parent First Name		
Address (Postal Code Required)		
Phone (Primary)		
Phone (Secondary)		
Email		
<b>Volunteer Interest*</b>	Coach <input type="checkbox"/> Asst. Coach <input type="checkbox"/> Manager <input type="checkbox"/>	Coach <input type="checkbox"/> Asst. Coach <input type="checkbox"/> Manager <input type="checkbox"/>

★ All volunteers (coaches, assistant coaches/helpers and managers) will need to complete a Criminal Records Check and a Child Abuse Registry Check. Valid clearances will need to be submitted to the club office and will be kept on file.

Interested in goalkeeper training

I would consider donating a prize or product for special events or club fundraising events

I am interested in information about or I have knowledge of sponsorship opportunities.

**Played Soccer before ?** (Check the highest level you played)

Division	U9	U10	U11	U12	U13	U15	U17	U21	Senior
Community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prospects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance AA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance AAA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Commitment Level <input type="checkbox"/> I will attend practice/games when available <input type="checkbox"/> I will attend most practices/games <input type="checkbox"/> I plan to attend all practices/games	Any medical conditions that we should be aware? :
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# ASSUMPTION OF RISK AND AGREEMENT TO ABIDE BY SOCCER NOVA SCOTIA AND HALIFAX DUNBRACK SOCCER CLUB BYLAWS, POLICIES, AND PROCEDURES

Waiver: All players over 18 years of age, and the parent or guardian of those under 18 years of age must sign/acknowledge acceptance of this waiver form. The wording of this form meets the requirements of the Halifax Dunbrack Soccer as well as those set out by Soccer Nova Scotia, the provincial governing body for soccer in Nova Scotia.

## ASSUMPTION OF RISK

There is a potential risk for injury involved in training and participating in any sport. Soccer Nova Scotia has tried to create a safe and controlled environment for safe participation. The Club and officials have established rules in conjunction with the governing body for participation and conduct on and about the playing area that should be followed.

I, the player, or I the parent(s)/legal guardian(s) of the player being registered, do hereby consent to myself or my child/ward playing soccer with Halifax Dunbrack Soccer. I understand that the Club and its representatives will not be held liable for any loss or accident caused by or upon myself or my child/ward while participating in soccer or while traveling to or from games, practices or other club activities. I have also been made aware of the potential dangers of climbing on soccer goals/equipment and assume all liability for any personal injury to myself or to my child/ward as a result of such activities. In case of medical emergency, I give permission to the team management or club executive to take whatever steps may be necessary to obtain treatment for myself or my child/ward.

## PHOTO RELEASE

- I grant to Halifax Dunbrack Soccer the right to take photographs of my child throughout the Summer 2019 season.
- I authorize Halifax Dunbrack Soccer, its assigns and transferees to copyright, use and publish the same in print and/or electronically.
- I agree that Halifax Dunbrack Soccer may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity/news releases, illustration, print advertising, and Web content (including social media).

## AGREEMENT TO ABIDE BY SNS AND CLUB BYLAWS, POLICIES AND PROCEDURES

I agree to abide by Soccer Nova Scotia and the Halifax Dunbrack Soccer's Bylaws, policies, and procedures at all times. FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION) This is to certify that I, as parent/guardian with legal responsibility for this participant, on behalf of the participant, do consent and agree to the assumption of risk and agreement to abide by Soccer Nova Scotia and Halifax Dunbrack Soccer's Bylaws, policies and procedures.

\_\_\_\_\_  
PRINT PARTICIPANT'S NAME

X \_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
Date Signed

**Financial Assistance Available through programs such as Jumpstart and Kidsport.**