



Pegasus Athletic Club-Player Registration Form

www.pegasusac.ca

27 Howe Island Ferry Road, Kingston, ON K7L 4V1

613-544-1796

pegasus@kos.net

PERSONAL INFORMATION

Full Name: _____
 Last _____ First _____ M.I. _____

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

Home Phone: () _____ Alternate Phone: () _____

Fax Number: _____ E-mail Address: _____

Birth Date: _____ Proof of Birthdate: Birth Certificate Old Card Other Sex: _____

OSA Registrant Number: _____ Club Number : 1907

CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Ontario Soccer Association *Southeast Ontario Soccer Association*, and Pegasus AC collect and use personal information about me or my child/ward for the following purposes:

1. Receiving communications from the Ontario Soccer Association, District Association, Club and League;
2. Determining appropriate age group, player classification and eligibility;
3. 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, District Association and Club, I, the participant and parent/guardian (if participant is under 18 years of age), agree as follows:

1. 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.
2. I have reviewed the waiver/participation agreement attached and my signature affixed hereto indicates my agreement with such waiver/participation agreement.
3. I am aware of The Ontario Soccer Association, *Southeast Ontario Soccer Association*, (*Pegasus AC*) and League bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
4. I accept sole responsibility for my or my child/ward's personal possessions and athletic equipment.
5. 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 Participant (If aged 13 and over) Signature of Parent/Guardian (If under 18) Date

Cash () Cheque () _____
 Registrar Signature