

# CALGARY WOMEN'S SOCCER ASSOCIATION

## LEAGUE MEMBERSHIP AND REGISTRATION FORM

PLEASE PRINT CLEARLY AND FIRMLY

Team Name:	Division:	Year:	Indoor / Outdoor
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Name: \_\_\_\_\_

Previous Name: *(if different from last registered season)* \_\_\_\_\_

Player:       Coach       Manager  *(You may check more than one box)*

Address: \_\_\_\_\_

City:	Postal Code:
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Home Phone:	Age:
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Player's ID Number:	Birthdate: <i>(nm/dd/yy)</i>
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E-mail Address: \_\_\_\_\_

Last Registered Team: *(if different from above)* \_\_\_\_\_

Last Provincial Association Affiliation: *(if not ASA)* \_\_\_\_\_

If you were last registered on a team outside the City of Calgary, a letter of release indicating that you have no outstanding suspensions or fines is required from your previous CSA Affiliate prior to the acceptance of this registration.

#### RELEASE AND WAIVER

In consideration of the Calgary Women's Soccer Association (C.W.S.A.) accepting this application I, \_\_\_\_\_, for myself, my heirs, executors, administrators and assigns, release the C.W.S.A., its respective servants, agents or employees from any claims, demands, damages, actions or causes of action arising out of or in consequence of any loss, injury or damage to my person or property incurred while participating in a C.W.S.A. game notwithstanding any such loss, injury or damage may have arisen by reason of the negligence of the C.W.S.A., its servants, agents or employees. Without limiting the generality of the foregoing, I further release any recourses which I may now or hereafter have resulting from any decision of the C.W.S.A.

#### INDEMNIFICATION

In consideration of the C.W.S.A. accepting the within application, I \_\_\_\_\_, agree to indemnify the C.W.S.A., its servants, agents or employees from any claims or demands which might be made against the C.W.S.A. arising out of or in consequence of the attendance or participation by myself in a C.W.S.A. game.

In consideration for attending or participating in C.W.S.A. events and games at the Calgary Soccer Centre (CSC), I \_\_\_\_\_ for myself, my heirs, executors, administrators and assigns, do hereby release the Calgary Soccer Federation (CSF), its employees and agents, from any claims, damages or causes of action arising out of or in connection with any loss, injury or damage to my person or property incurred while attending or participation in a C.W.S.A. event or game at the CSC, regardless of whether or not such loss, injury or damage arises by reason of the negligence of the CSF or its employees and agents. I further agree to indemnify the CSF and its employees and agents from any claims or demands which might be made against the CSF arising out of or in consequence of my attendance at or participation in a C.W.S.A. event or game at the CSC.

All details concerning player's age and area of residence are correct and conform with the rules governing player and team eligibility for league and cup competition. I also agree to abide by the Rules and Regulations as set out by the District, Alberta and Canadian Soccer Associations

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Would you be willing to volunteer for the league: **YES - NO** If yes, how much time do you have and what would you like to do?

Registration     Tournaments     Committee Work

#### Minor Player Authorization

Must be signed by player's Parent or Guardian

Date:	Signature:
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Telephone Number:	Print Name:
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By signing, I hereby authorize the above player to play for the above team.  
Minor Authorization is Valid for Current Season Only

**For Official Use Only:**

Date

Authorized By