



Belle River Men's Soccer League 2010 Registration Form

www.brmsl.com



LAST NAME	FIRST NAME
MAILING ADDRESS	
HOME PHONE NUMBER	ALTERNATE PHONE NUMBER (cell, pager, etc)
EMAIL ADDRESS	DATE OF BIRTH
	AGE:

YEARS OF EXPERIENCE	POSITION(S) PLAYED
WHAT %AGE OF GAMES CAN YOU PLAY IN? PLEASE LIST REASONS (vacation, work, etc.)	
/ 100%	REASON:

DO YOU HAVE ANY HEALTH PROBLEMS WE SHOULD BE AWARE OF?	
EMERGENCY CONTACT	
NAME:	RELATIONSHIP:
PHONE NUMBER:	ALTERNATE PHONE NUMBER:

SIGNATURE <i>(I HAVE READ AND UNDERSTAND THE INFORMATION ON THIS FORM)</i>

Registration for 2009 is \$85.00 per player. Payment can be made in the form of cash or cheque.

Make cheques payable to:
Belle River Men's Soccer League

****Registration fee is NON-REFUNDABLE****



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WAIVER / PARTICIPATION AGREEMENT

Name of Participant: _____

ALL SPORT, INCLUDING SOCCER, HAS ITS RISKS.

I participate in the sport of soccer because it is physically and mentally challenging. In consideration of my participation in such programs, activities and events, I hereby acknowledge that I am aware of the risks and hazards associated with or related to soccer. The risks and hazards include, but are not limited to:

- Injuries from executing strenuous and demanding physical techniques in soccer ;
- Injuries from grass, turf, and other surfaces including bacterial infections and rashes ;
- Injuries resulting from falls to the ground due to uneven or irregular terrain or surfaces ;
- Injuries from collisions with walls and soccer equipment ;
- Injuries resulting from failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment ;
- Spinal cord injuries which may render me permanently paralyzed ;
- Injuries from extreme weather conditions which may result in heatstroke, sunstroke, or hypothermia ;
- Injuries from contact, colliding or being struck by other participants, spectators, equipment, or vehicles ;
- Injuries resulting from vigorous physical exertion and strenuous cardiovascular workouts ;
- Injuries from exerting and stretching various muscle groups ; and
- Travel to and from events which are an integral part of the league's activities.

Furthermore, I am aware:

- That injuries sustained in soccer can be severe ;
- That I may come into close contact with other participants, including the possibility of accidental and unexpected touching ;
- That I may experience anxiety while challenging myself during the activities ;
- That my risk of injury is reduced if I follow all rules established for participation ; and
- That my risk of injury increases as I become fatigued.

I AGREE TO BE RESPONSIBLE FOR MYSELF

I am participating voluntarily in these activities, events and programs. I agree that there are risks in soccer as described above. By participating voluntarily in these activities, events and programs, I am exposed to these risks and hazards. I agree to accept them and be responsible for any injury or other loss which I might receive while participating in these activities, events and programs.

If something happens to me, I release the organizers of responsibility for any claims, demands, actions and costs which might arise out of my participation. In this Agreement I understand "organizers" to mean: Belle River Men's Soccer League, its directors, officers, members, employees, volunteers, officials, participants, agents, sponsors, owners/operators of the facility, and representatives.

I ACKNOWLEDGE MAKING THIS AGREEMENT

I have read and understand the terms and conditions of this agreement, and by signing it voluntarily, I am agreeing to abide by these terms.

PRINTED NAME OF PARTICIPANT

SIGNATURE OF PARTICIPANT

DATE