CLUB TRY-OUT
PLAYER FORM

PLAYER INFORMATION

Surname: _____ **First Name:** _____

Address: _____ **City:** _____ **Prov:** _____

Postal Code: _____ **E-mail:** _____

Home #: (_____) _____ **Bus. #:** (_____) _____ **Cell #:** (_____) _____

Date of Birth: (dd/mm/yy) _____/_____/_____ **Age (in 2015)** _____ **Male:** _____ **Female:** _____

TERMS AND CONDITIONS:

I understand that while under trial with FC Emery or Tecnico Ambato FC that I assume all liability for property or person. I realize soccer is a sport and with all sports the risk of injury is high. I assume all risks while on Trial with the club.

CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Canadian Soccer Association, the Ontario Soccer Association, North York Soccer Association, Futbol Club Emery and Tecnico Ambato FC to collect and use personal information about me or my child/ward for the purpose of receiving communication from OSA, NYSA, FC Emery and Tecnico Ambato FC.

***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 child's membership in the Ontario Soccer Association, North York Soccer Association, FC Emery and Tecnico Ambato FC, I parent/guardian, agree as follows:

1. **I understand that while on Trial with the club I in no part belong until I have been accepted by the trainer**
2. **I understand that with any selection process there is difficulty with the decision, I realize that I am in no way guaranteed a spot with the club until otherwise mentioned or sent an acceptance letter.**
3. **I accept sole responsibility for my or my child's personal possessions and athletic equipment.**
4. **I accept all liability for any damage to the playing equipment caused by me or my child's careless, negligent and/or improper handling.**

By signing and dating below, you agree that you are the parent or legal guardian of the player being registered and are to be bound by this Legal Agreement even if you have not read the agreement.

_____ _____

Signature of parent/guardian **DD/MM/YY**

CLUB USE ONLY:

Partial Payment(s) detailed:

Payment Received by: _____ Amount $ _____

Cash _____ Cheque #_____

Date Payment received: _____

Proof of Age on File : _____

Picture on File: _____