

TOWNSHIP of RIDEAU LAKES  
1439 County Road 8, Chantry, Ontario K0E 1G0

# YAC SUMMER SOCCER LEAGUE REGISTRATION FORM

(This form can be mailed or dropped off at the Township Offices in Chantry with appropriate registration fees)

## PARTICIPANT (s) INFORMATION

Team Name \_\_\_\_\_

Name \_\_\_\_\_ M \_\_\_ F \_\_\_ Age (12-18) \_\_\_\_\_

Teammate #1 \_\_\_\_\_ M \_\_\_ F \_\_\_ Age (12-18) \_\_\_\_\_

Teammate #2 \_\_\_\_\_ M \_\_\_ F \_\_\_ Age (12-18) \_\_\_\_\_

Teammate #3 \_\_\_\_\_ M \_\_\_ F \_\_\_ Age (12-18) \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ E-mail (this is our primary form: \_\_\_\_\_

This program involves physical activity. Are there any health issues or medications that should be made aware of??

Please identify any allergies and if these allergies require an EpiPen: \_\_\_\_\_

### CONTACT INFORMATION FOR PARTICIPANTS UNDER THE AGE OF 18

Parent/Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### Permission to Photograph/Video

By signing this registration form, I give permission for the Township of Rideau Lakes to take pictures/videos of myself and/or family members that may be used in future publications and/or on the Township's website for the purpose of promoting the recreational activities, understanding that the person(s) photographed/videod *will not be identified by name*.

\_\_\_\_\_  
Signature of participant or parent/guardian

\_\_\_\_\_  
Date

**Refunds:** Requests must be received at least 5 days prior to the start of the program. **No refund will be given after the program commences** except on a pro-rata basis for certified medical reasons. Cancellation fees: \$20.00 or 25% of the program fee, whichever is greater.

**Waiver:** By signing this registrations form, I understand that there are risks involved in participating in any activity or program and I acknowledge that my choice to participate or register myself or my children in the above mentioned activity or program brings with it the assumption by me of those risks. I am aware of no physical or other reason why the above named person should not participate in this program. I do hereby release the Township of Rideau Lakes and its employees and agents from any claim whatsoever arising from my participation or from my children's participation in any program as stated above, or in any facility or location where a program is held.

\_\_\_\_\_  
Signature of participant or parent/guardian

\_\_\_\_\_  
Date

For Office Use Only: Registration Fees \$ \_\_\_\_\_ Paid by Cheque \_\_\_\_\_ Cash \_\_\_\_\_ Debit \_\_\_\_\_

Cheques or money orders are to be made payable to the **Township of Rideau Lakes**.  
An administrative fee will be charged for any returned cheques.