

PLAYER WAIVER FORM

2010 OUTDOOR SEASON

PLAYER INFORMATION

Player's name _____ Birth Date _____
(First) (Middle) (Last) (MM/DD/YY)

Sex (Circle) M F Medical Conditions/Alergies _____

ECCA ID# _____ Address _____

City _____ Postal Code _____ Home Phone No _____

Parent's Name _____ Email Address _____

Emergency Contact (other than parent above) _____ Home Phone No _____

Parent Volunteers (Please circle your preference) Coach Asst Coach Team Manager Wind-up party (June 19th) Other _____

P1: LIABILITY RELEASE

I, _____, the parent/guardian of the above-named player understand and accept the risks to the player through his or her participation in activities associated with soccer, which may include the risk of serious and permanent injury and potentially death. Therefore, in consideration of the Evanston-Creekside Community Association ("ECCA") permitting the player to attend and participate in any of its activities, events or games, I, on behalf of and for the player, his or her heirs, representatives, executors and administrators, do hereby release (each of the following being a "Released Party") ECCA, and all facility providers (such as gyms, soccer fields and soccer centres where an activity, event or game may take place) and all directors, officers, employees and agents of such parties, from any and all claims, demands, damages and causes of action which may arise out of or in connection with any loss, injury or damage to the player or their property which may be suffered or incurred while attending or participating in (including transportation to and from) a ECCA activity, event or game, regardless of whether or not such loss, injury or damage arose by reason of the negligence of a Released Party. I further agree to indemnify and hold harmless all Released Parties from any and all losses, claims, demands and damages that may be suffered or incurred by any Released Party arising out of or in any way connected with the player's attendance at or participation in any such activity, event or game.

P2: PRIVACY RELEASE

The parent and/or guardian hereby consent to the ECCA collecting, using and disclosing the personal information of the player in accordance with the ECCA Privacy Statement. The Privacy Statement can be obtained from the Club/Community or from www.eccacalgary.com.

Parent or Guardian Signature

Print Name

Date

Birth Certificate Verified (Yes/No) _____

Payment Received Cash _____ Cheque(#)_ _____

Note 1: The Club/Community must make the ECCA Privacy Policy available at the time the waiver is provided to the parent or guardian.

Note 2: The parent or guardian must sign this form for the player to be eligible to register and play with ECCA.