

BURLINGTON WOMEN'S



RECREATIONAL SOCCER LEAGUE

Registration Form

Surname

Give Name

Birth Date – Day/Month/Year

Street Address

Unit #

City

Postal Code

Home Phone Number

Cell Phone Number

Business Phone Number

Please Select a Division: INDOOR Mondays Sundays Oct to Dec Sundays Jan to Apr

OUTDOOR Open - Sundays Over 30 - Tuesdays Competitive OWSL

New Players
Attach Photo
Here

Proof of age, and current residence must be furnished together with a passport size photograph.

Please read, then acknowledge by signing in the space provided.

In consideration of your acceptance of this registration card, I myself, my spouse, my children, other family members, my heirs, executors, administrators, successors and assigns, do hereby remise, release and forever save harmless, protect and keep indemnified. The Burlington Women's Recreational Soccer League (B.W.R.S.L.), The City of Burlington, Regional Municipality of Halton, all sanctioning bodies, clubs, sponsors, participants, competitors, officials, servants and representatives from and against any and all kinds of actions, claims, costs and expenses and demands in respect to death, injury, loss and damage to my person and property, how-so-ever caused arising out of my participation prior to, during or subsequent to, activities sanctioned by the B.W.R.S.L., notwithstanding that the same may have been contributed to or occasioned by the negligence of the aforesaid. I attest that I am physically fit, and sufficiently trained to participate in B.W.R.S.L. activities. By submitting this signed registration card, I acknowledge having read and agreed to the waiver, release and indemnification.

Player's Signature: _____

Cash

Cheque

Registrar's Signature: _____

Registration Date: _____