



# Cochrane Rangers Soccer Club REGISTRATION FORM Men's Recreational Indoor Season 2011-2012

Please Note: Registration deadline is September 19, 2011

Player's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (dd/mm/yy)

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home Ph. \_\_\_\_\_ Cell Ph: \_\_\_\_\_ Wk Ph. \_\_\_\_\_

Email address: \_\_\_\_\_ (to be used for CRSC Communications)

Emergency Contact Name & Number: \_\_\_\_\_

Medical information: Please indicate any allergies or medical conditions the coaches should be aware of:

Interested in volunteering?    Yes                      No

**\*\*\*\*\*Cochrane Rangers Soccer Club – Player Waiver Form\*\*\*\*\***

I hereby guarantee that all of the information provided by me is accurate and I agree to pay the fees as defined on this registration form.

\_\_\_\_\_ (Signature)

I understand and accept the risks involved with playing soccer. I hereby agree that Cochrane Rangers Soccer (CRS), its directors, coaches and all volunteers will not be held responsible for any accident, injury, or loss however caused and agree to release the above mentioned from all claims which may arise as a result of, or by reason of, above such accidents or loss. CRS reserves the right to request any participant to withdraw from the program prior to its termination if the person is not acting in an acceptable manner.

Name:(please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Cost for the season is \$210.00**

One \$210 cheque post dated for October 1, 2011 is accepted as payment. Forms and fees must be submitted to your team manager. The team manager can then pass your team's forms and fees along to Treasurer Melanie Martzoukos – melanie@tanninfinewines.com