



# EastRidge Sports Registration Form

**Address:** EastRidge Church, 12485 Tenth Line, Stouffville, On, L4A 7X3

**Email:** [office@eastridge.ca](mailto:office@eastridge.ca) **Website:** [www.eastridge.ca/sports.html](http://www.eastridge.ca/sports.html)

**Player Information** (all fields are required)

<b>First Name:</b>		<b>Last Name:</b>	
<b>Address:</b>			
<b>Home #:</b>		<b>Business #:</b>	
<b>Cell #:</b>		<b>Year of Birth</b>	
<b>Email Address:</b>			

**All sports are for those who are 19 years of age and older. Are you older than 19? Yes or No**  
**Sorry, but there are NO exceptions.**

**Registering for which Sport?**

**Please note that a separate registration form is required for each sport.**

Sport	Select only <b>ONE</b> sport per form	Which day or days of the week do you plan to participate?
<b>Co-ed Badminton</b>		
<b>Volleyball</b>		
<b>Men's only Indoor Soccer</b>		

EastRidge Evangelical Missionary Church ("**EastRidge**") offers the Sports Program for recreational purposes. Depending on the number of registrations the EastRidge organizational team will determine the number of teams. The teams will be created randomly with an effort to make all teams balanced (if applicable).

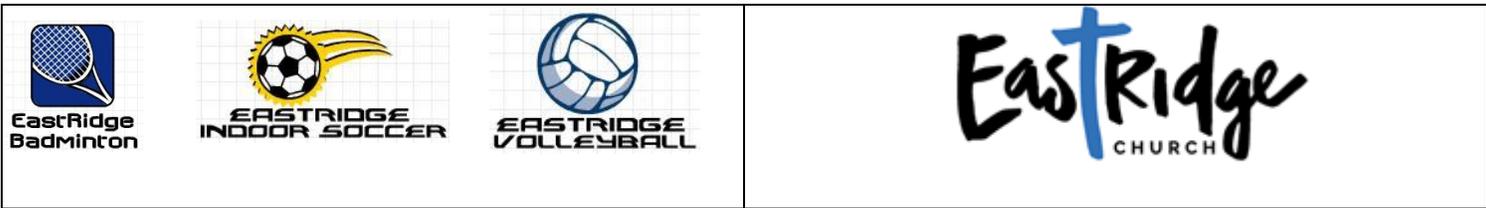
**Agreement**

EastRidge has established rules for participation in the sports programs. I agree to abide by the rules, policies and decisions of EastRidge. I understand that a Participant may be removed from a league/team/play if the continued participation by this Participant will result in safety concerns or otherwise adversely affect the enjoyment of the sport by other players on the team/league or facility.

I understand that EastRidge needs to collect and use my personal information; to operate their sports programs and that EastRidge will not provide my personal information to any third parties. I grant permission to EastRidge to gather this information and to quote me in newsletters, magazines, and other media; and, in any form not heretofore described, for the purpose of advertising or communicating activities of EastRidge.

I further understand that I will be asked to sign a Release of Liability Form (page 2 of this document).

I certify that all of the information provided on this form is accurate and complete. I have read and understood, and I accept, all of the terms and conditions that are stipulated in this document.



# EastRidge Sports Release Of Liability

PLEASE READ CAREFULLY

This is a legal document. By signing this document you are agreeing to give up certain legal rights including the right to sue. You are also assuming certain obligations. ***Please read carefully!***

1. I hereby acknowledge that I have voluntarily applied for and been accepted into the EastRidge Sports Program.
2. I also acknowledge that EastRidge has advised of the specific rules of play that are in effect for this Program and I have been made aware of the risks and hazards associated with my participation. The risks and hazards of playing may include, but are not limited to injuries from:
  - Executing strenuous and demanding physical techniques;
  - Falls to the ground due to uneven or irregular terrain or surfaces;
  - Collisions with walls and equipment;
  - Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
  - Spinal cord injuries which may render me permanently paralyzed;
  - Extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
  - Contact, colliding or being struck by other participants, spectators, equipment or vehicles;
  - Vigorous physical exertion and strenuous cardiovascular workouts;
  - Exerting and stretching various muscle groups.

Furthermore, I am aware:

- That injuries sustained may be severe;
- That I may come into close contact with other participants, including the possibility of accidental and unexpected contact;
- That I may experience anxiety while challenging myself during the activities;
- That my risk of injury is reduced if I follow all rules adopted during training; and
- That my risk of injury increases as I become fatigued.

3. I understand that my participation in this EastRidge Program may have undesired and unanticipated consequences. Notwithstanding this, I hereby release and forever discharge EastRidge Evangelical Missionary Church and all affiliates, members, directors, officers, leaders, agents, volunteers, and employees from any and all actions, causes of action, suits, claims, demands, liabilities, including negligence, and expenses I have now or may have in the future in connection with, arising from or related to my involvement with or participation in this activity.

I acknowledge that I have read this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, and executors.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Please Print Your Name**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**Signature of Witness**

\_\_\_\_\_  
**Date**