

Registration and Release Form for Tryout / Open House / Workout

Last Name		First Name	
Mailing Address			
City	Province	Postal Code	Apt. / Suite
Email Address	Telephone	Cellphone	
Gender (F / M)	Date of Birth (dd/mm/yy)		
Club Played with Last Season	Age Group Last Season	Position(s)	
	Waiver and I	ndemnification	
ELEMENTS OF RISK NOTICE: The risk of injury exists in every athletic a activities, injuries may range from minor a paralysis or prove to be life-threatening. It is employees or agents, or the facility whinjury occurring. The chances of an injury attempts to manage, as effectively as possible.	sprains and strains to more seriou Injuries as a result of participation nere the activity is taking place. An or can be reduced by carefully follo	is injuries affecting the head, in an activity can occur withon a athlete choosing to participa wing instructions at all times	neck or back. Some injuries can lead to out fault on either the part of the athlete, or ate in the activity assumes the risk of an
RELEASE STATEMENT: Athletes and their families hereby release for any injury incurred while participating strictly at the risk of registrants who agree approved through the By-Laws, Rules and any of its officials are not responsible for caused. I also understand and agree that	in tryout / open house / workout s e to abide by its rules and regulati d Regulations of the Ontario Volle any injury, damage or loss resulti	essions. Furthermore, the us ons. I agree to abide by the r eyball Association (OVA). I ur ng from any accident from kn	rules and procedures of the "Club" as nderstand and agree that "Club" and/or nown or unknown conditions howsoever
Athlete's Signature		Parent or Guardian Si	gnature (if under 18 years of age)

Date

Date