



# LIONS SOCCER CLUB AND ACADEMY (LSCA)

CALGARY, AB

PHONE: (403) 432-6666 || EMAIL: [info@lionssocceryyc.ca](mailto:info@lionssocceryyc.ca) || WEB: [www.lionssocceryyc.ca](http://www.lionssocceryyc.ca)

## PLAYER REGISTRATION FORM 2024

Team: \_\_\_\_\_

### PLAYER INFORMATION

First Name:	Last Name:
DOB:	Gender(M/F):
Address:	
Postal Code:	UUID(If Applicable):

### PARENT INFORMATION

First Name:	Last Name:
Phone:	Email:
Address:	
Postal Code:	Relationship to Player:

### REGISTRATION FEE

U4-U6: \$350, U7-U9: \$450, U10 -12: \$550, U13-U17: \$675.  Existing LSCA Player: \$25 Discount

Payment Method: Cash  Cheque  e-Transfer  Website Payments: +\$20 Processing Fee e-Transfer must be sent to [info@lionssocceryyc.ca](mailto:info@lionssocceryyc.ca) with parent phone# in transfer message.

### REFUND POLICY

Full refunds less an administration fee of \$50 with in 7 days of registration, **NO REFUNDS** will be issued after that. Refund requests must be sent in written to [info@lionssocceryyc.ca](mailto:info@lionssocceryyc.ca).

WAIVER, RELEASE OF INFORMATION AND CONSENT TO PARTICIPATE

**Waiver:** Soccer is a physical contact sport that involves risk of injury. As a parent and/or guardian, I understand and accept the liability and risk associated with my child's participation in the CMSA game and LSCA practice sessions. I hereby release, waive liability, discharge, hold harmless, indemnify, and covenant to sue LSCA, the league, and tournament, their associated administration, and coaching staff, from any liability incurred in the conduct of mine and/or my child's participation in practice and game sessions.

**Release of information:** The parent and/or guardian consent to LSCA for collecting, using, and disclosing the player registration information for all soccer participation registration requirements including, but not limited to, CMSA, ASA, CSA, and provincial affiliated associations.

**Consent to participate and media:** I as a parent and/or guardian of the above-mentioned player, hereby authorize them to play for LSCA and consent to abide by the club's policies, and code of conduct and publish the child's image on the club's media/social media platform.

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_ / \_\_ / \_\_\_\_