



**RUSH CANADA SOCCER ACADEMY  
INDOOR FUTURE STARS REGISTRATION FORM 2016**

**PERSONAL INFORMATION**

Player Name:	_____	_____	_____
	<i>First</i>	<i>Last</i>	<i>M.I.</i>
Address:	_____		_____
	<i>Street Address</i>		<i>Apartment/Unit #</i>
	_____	_____	_____
	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
Home Phone:	( ) _____	Business Phone:	( ) _____
Cell Number:	( ) _____	E-mail Address:	_____
Birth Date:	_____	Gender:	_____

**\*Rush Canada Soccer Academy does not disclose any of your information to any third parties.**

**PLAYER INFORMATION**

Age Group: \_\_\_\_\_

Season: \_\_\_ Winter/Indoor \_\_\_ Summer/Outdoor

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

Uniform Size: \_\_\_\_\_

**FAMILY INFORMATION**

Parent/Guardian Name: _____	Parent/Guardian Cell Phone: _____
Spouse Name: _____	Spouse Cell Phone: _____
Parent/Guardian Email: _____	Spouse Email: _____

**CONSENT FOR USE OF PERSONAL INFORMATION**

I authorize the Rush Canada Soccer Academy to collect and use personal information about me or my child/ward for the purpose of receiving communications from the RCSA. We do not sell or disclose any of your personal information to any third parties. I agree to the Policies Terms and Conditions of Rush Canada Soccer Academy. The undersigned parent or guardian represents that the player is in good health and can participate in competitive soccer. I Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used, and acknowledge further, that there may be other risks not known or not responsibly foreseeable at this time; assume all foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death. Release, waive, discharge and covenant not to sue Rush Canada Soccer Academy, or teams and their respective administrators, directors, agents, coaches, and other employees of the organizations, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leaser's of premises used to conduct the event, all of which are hereinafter, referred to as "Releases" from demands; losses or damages on account of injury, including death or damages to property, caused or alleged to be caused in whole or in part by the negligence of the "Releasee" or otherwise.

I acknowledge that I have read this registration agreement in its entirety and that I have executed this registration agreement voluntarily.

_____	_____	_____
Name of Parent/Guardian	Signature of Parent/Guardian	Date

## PAYMENT

Payment Information (**Office Use Only**):

**Future Stars Program registration amount:** \$ 150.00

**Future Stars Program:**

Sat 2/6/2016 9:00 AM-10:00 AM

Sat 2/13/2016 9:00 AM-10:00 AM

Sat 2/20/2016 9:00 AM-10:00 AM

Sat 2/27/2016 9:00 AM-10:00 AM

Sat 3/5/2016 9:00 AM-10:00 AM

Sat 3/12/2016 9:00 AM-10:00 AM

Sat 3/19/2016 9:00 AM-10:00 AM

Sat 3/26/2016 9:00 AM-10:00 AM

Full payment must be submitted together with the registration form.

Payment method: \_\_\_\_\_

Payment amount: \_\_\_\_\_

Notes:

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**Method of Payment:** Email Transfer ( [info@rushcanada.com](mailto:info@rushcanada.com)) / Cash/ Cheque