GREATER VANCOUVER UNITED SPORTS CLUB

2024 SPRING REGISTRATION FORM

Ph: **604.723.5560 604.812.8050**

Email: info@gvusc.ca

Website: www.vancouverunitedsportsclub.com



PLAYER INFORMATION					
Please Select:	☐ RETURNING PLAYER	☐ NEW PLAYER	Gender:	☐ MALE	☐ FEMALE
FIRST NAME	MIDDLE NAME LAST NAME DATE OF BIRTH (MMM / DD / YYY				MM / DD / YYYY)
FULL ADDRESS	CITY			POSTAL CODE	
HOME BUONE	CELL PHONE EMAIL ADDRESS				
HOME PHONE	CELL PHONE EMAIL ADDRESS				
PARENT/GUARDIAN FULL NA	EMERGENCY CONTACT	TACT CONTACT PHONE			
PREVIOUS COACH / TEAM MEDICAL ISSUES					
REGISTRATION All Program Dates: APRIL 1, 2024 – JULY 7, 2024					
U3 – U5			0117,2024		ć200
(2021 – 2019)	Two practices per we	ек			\$200
U6 – U9 (2018 – 2015)	Two practices & One	game per week			\$300
U10 – U12	Two practices & One	game per week			Ć27F
(2014 – 2012)	Two tournaments				\$375
U13 – U18	Two practices & OneThree tournaments	game per week			\$400
(2011 – 2006) • Three tournaments Please make all cheques payable to GREATER VANCOUVER UNITED SPORTS CLUB					
NSF cheque will be charged \$25 processing fee*					
ADMINISTRATION USE ONLY					
PAID AMOUNT: DATE:					
ALL PARTICIPANTS MUST COMPLY WITH RULES, REGULATIONS, AND POLICIES					
Release and Waiver of Liability, Assumption of Risk, and Indemnity and Parental Consent Agreement ("agreement") IN CONSIDERATION of being permitted to participate in any way in GREATER VANCOUVER UNITED SPORTS CLUB Activities ("Activity") I, for myself for personal representatives, assigns, heirs, and next of kin: ACKNOWLEDGE, agree, and represent that I understand the nature of GREATER VANCOUVER UNITED SPORTS CLUB Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. MINOR RELEASE: I, the minor's parent and/or legal guardian, understand the nature of GREATER VANCOUVER UNITED SPORTS CLUB activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the releasees from all liability claims, demands, losses, or damages on the minor's account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operation and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releasees named above, I will indemnify, save, and hold harmless each of the releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as a result of any such claim.					
I authorize the Greater Vancouver United Sports Club to use photographs or videos of me or my child for promotional or educational purposes in any type of media, including its website. I understand that I will not be paid or rewarded for providing this authorization.					
I have read and agreed to the refund policy as noted at www.vancouverunitedsportsclub.com. I have read and agreed to the Return to Play Policy as noted at www.vancouverunitedsportsclub.com.					
(Signature of Parent/Guardian)					
NAME (PRINT)	SIGNATURE	PELATION	NSHIP TO PLAYER	DAT	·c
INDIAL (LUINI)	SIGNATURE	RELATION	TOTALEN	DAT	•
OFFICIAL RECEIPT (BN# 81942 0795 BC0001 SN# S0063560) Greater Vancouver United Sports Club www.vancouverunitedsportsclub.co					couverunited sports club.com
Player Name		Paid Ar	mount		
Authorized Signature		Date			