

## DSP Health & Consent Form 2012

This form/waiver, signed below by the parent or guardian of the child named herein, must be presented to the team manager in order for the child to be able to participate in any Ottawa Internationals Soccer Club event, including practices. Please return a signed copy to your team manager and retain one copy for your own records.

Site and team: \_\_\_\_\_

Coach: \_\_\_\_\_

Our coaches need to be aware of any health issues that may affect your child's ability to fully participate. Please confirm that your child has no health problems or indicate his or her health problems as requested below.

My child has no health problems \_\_\_\_ OR

My child has: Asthma \_\_\_\_\_ Wears glasses \_\_\_\_ Wears contact lenses \_\_\_\_\_  
Diabetes \_\_\_\_\_ Heart condition \_\_\_\_\_ Learning disability \_\_\_\_\_  
Allergies (please specify) \_\_\_\_ Puffer required

Others health condition (Please specify) \_\_\_\_\_

Player's Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: Day \_\_\_\_\_ month \_\_\_\_\_ year \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Name of parent(s) or legal guardian: \_\_\_\_\_

Parent's daytime telephone number(s): \_\_\_\_\_

Emergency contact name and telephone number (in case parents/guardian cannot be reached):  
\_\_\_\_\_

Please understand that we have your child's safety as our prime concern and that you may be requested to provide a doctor's certificate testifying that your child's health will not be endangered by participating in the sport of soccer. This would normally be required in cases where a player is returning from a serious accident or injury.

I have read this consent form/waiver and understand the risks associated with the game of soccer and permit the aforementioned child to fully participate in Ottawa Internationals Soccer Club Inc. DSP programs and events. I, the undersigned, as a parent/guardian of the above-named player, hereby give my approval for him/her to play soccer. I agree to assume all risks and responsibilities incidental to such participation, including transportation to and from such activities and on behalf of the said player and myself as parent/guardian. I do hereby waive, release, absolve, indemnify and agree to hold harmless the Ottawa Internationals Soccer Club, the organizers, convenors, coaches and the participants in all activities of said Club and League, including those persons transporting the said player to and from such activities. I also agree to abide by the Published Rules of the Ontario Soccer Association, the District Association, and the Ottawa Soccer Internationals Soccer Club Inc.

Parent or Guardian name and signature: \_\_\_\_\_ Date \_\_\_\_\_

This form will be held by the team and destroyed at the end of the season.