



Registration Form

Date: _____

Membership #: _____

(office use only)

League/Association Name: _____

Name: _____ Date of Birth: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____ Email: _____

Waiver

I, the applicant, on behalf of myself, members of my family, my heirs, executors, administrators and assigns, hereby forever release, discharge and hold harmless ontariotacklefootball.com and it's membership, representatives and agents for any injury, loss or damage to my person or property howsoever caused, arising out of or in connection with my taking part in Football activities and not withstanding that the same may have been contributed to or occasioned by the negligence of ontariotacklefootball.com and it's membership representatives or agents.

I am fully aware that there is a risk of injury involved in participating in this type of activity.

In witness, I have hereunder set my hand this _____ day of _____ 20__.

Signature (must be parent or Guardian if under 18 yrs of age)



Proud Member of Football Canada