



Juventus Academy Toronto PRE-ACADEMY PLAYER REGISTRATION FORM

PLAYER INFORMATION

Player Name: _____ M: _____ F: _____ D.O.B. MM/DD/YYYY
 Address: _____ City: _____
 Province: _____ Postal Code: _____
 E-mail: _____
 Home #: _____ Work #: _____ Cell#: _____
IN CASE OF EMERGENCY, PLEASE CONTACT:
 Name: _____ Phone #: _____ Relation to Player: _____
 Medical Problems: _____ Allergies: _____

PROGRAM DETAILS

21 training sessions includes closing ceremony - 1 hour training using the Juventus Methodology
 Licensed coaches - Technical, Fitness, Fun - Juventus uniform
 Wednesdays 6 to 7pm and/OR Saturdays 9 to 10am

CONSENT FOR USE OF PERSONAL INFORMATION

I authorize the Juventus Academy Toronto, Versus Soccer League and Trio Sportsplex to collect and use personal information about me for the purpose of receiving communications from Juventus Academy Toronto, Versus Soccer League and Trio Sportsplex League and Club. I understand that I may withdraw such consent related to receiving communications at any time by contacting the Juventus Academy Toronto, Versus Soccer League and Trio Sportsplex - info@juventusacademytoronto.com.

The administrative staff will advise the implications of such withdrawal.

We do not sell or distribute your personal information to any other third party not listed herein.

ACCEPTANCE OF TERMS AND CONDITIONS

In consideration of the acceptance of me or my child/ward's membership in the Juventus Academy Toronto, VSL, Trio Sportsplex. I, the participant, agree as follows:

1. I understand that I cannot play in any sanctioned soccer game until after this registration form has been validated and the registration data has been entered in The Juventus Academy Toronto, Versus Soccer League & Trio Sportsplex registration system.
2. I have reviewed the waiver attached and my signature affixed hereto indicates my agreement with such waiver.
3. I am aware of the Juventus Academy Toronto, Versus Soccer League, Trio Sportsplex and League bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
4. I accept sole responsibility for my personal possessions and athletic equipment.
5. I accept all liability for any damage to the playing equipment caused by me careless, negligent and/or improper handling.

By signing and dating below you agree that you are the player being registered and to be bound by this Legal Agreement even if you have not read this agreement. **By signing you are agreeing to the 21 session commitment from the start date and you are also agreeing to pay the full amount regardless of early withdraw. There are NO REFUNDS of deposits or payments.**

Signature of Participant (if aged 18 and over)

Signature of Parent/Guardian (if under 18)

Date

REGISTRATION FEE MUST BE PAID IN FULL. NO REFUNDS Please check off the training day

Wednesdays Saturdays 1 day \$685+HST 2 days \$1120+HST \$50 off no uniform

PAYMENT OPTIONS: Cheque made payable to: Juventus Academy Toronto Cash Debit

E-transfer to info@juventusacademytoronto.com security question password - soccer

Credit Card M/C Visa # _____ Expiry: _____

Name on card: _____ Payment Received by: _____

Office: 601 Cityview Blvd, Vaughan, Ontario, L4H 0T1 [Tel: 905-417-3700](tel:905-417-3700) Ext: 226

Website: www.juventusacademytoronto.com, E-mail: info@juventusacademytoronto.com