



**2010 SUMMER  
REGISTRATION FORM**

**Fredericton District Soccer Association  
900 Hanwell Road, Unit 13  
Fredericton, NB, E3B 6A2  
451-1342  
fdsa@nb.aibn.com  
www.fdsa.org**

**For Office Use Only:**

Age level: \_\_\_\_\_

Gender: \_\_\_\_\_

Year: \_\_\_\_\_

Total: \$ \_\_\_\_\_

Discount/Donation: \$ \_\_\_\_\_

Total Paid: \$ \_\_\_\_\_

<b>Registrant Name:</b> _____	<input type="checkbox"/> <b>Male</b> <input type="checkbox"/> <b>Female</b>
<b>Address:</b> (Street and/or Apt) _____	<b>Birth Date:</b> ____/____/____ Day (DD) Month (MM) Year (YYYY)
<b>City:</b> _____ <b>Province:</b> _____	<b>Medicare Number:</b> _____ (Necessary in case of emergency)
<b>Postal Code:</b> _____	Does your child have a medical condition that the coach should be aware of? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <b>If yes, please identify:</b> _____
<b>Parents/Guardians:</b>	<b>Method of Payment:</b> If mail in or in person, please circle <input type="checkbox"/> Cheque <input type="checkbox"/> Cash
<b>Mother's Name:</b> _____	<b>Note:</b> Don't want to stand in line? Want to pay by credit card? Log on to <a href="http://www.fdsa.org">www.fdsa.org</a> and click on the registration icon. This is a secure site created by Service NB. To register online, you must have an e-mail address. On-line registration starts on March 8 <sup>th</sup> . <b>Note:</b> If you register on-line, <u>print off your receipt</u> for the Child Tax Credit.
Home #: _____ Work #: _____	1) Faxed applications will NOT be accepted.
Cell Phone: _____	2) If you want to use Visa or Master Card, you must personally register yourself on-line; FDSA staff will be not able to do this for you.
<b>Father's Name:</b> _____	
Home #: _____ Work #: _____	
Cell Phone: _____	
<b>Email address:</b> _____ (This address is used to send all communication from FDSA office).	
<b>Special Request: (4U-10U only) – <u>ONE</u> request / child - No special request for Youth (12U-18U).</b>	

**Equipment and Injury Waiver / Privacy Policy**

*I will not hold the Fredericton District Soccer Association (FDSA) responsible for any injury sustained by my child/ward while engaged in playing soccer (including practices) or while traveling to or from games and practices. In appreciation of the loan to my child of any special equipment, including shirts and shorts used in connection with participation, I hereby agree to replace any equipment lost or destroyed by my child/ward while said equipment is entrusted to his/her care. I understand that the player named herein will be required to abide by the rules and by-laws of the FDSA.*

*The personal information collected herein by the FDSA will be used for the purpose of registration for FDSA activities and to enable FDSA to communicate with such parties. This information may be shared only with specific third parties, such as Soccer New Brunswick and the City of Fredericton, that are directly involved in FDSA activities and only when required to facilitate that involvement. It will not be shared or sold to third parties not directly involved in FDSA activities, except where required to do so by law.*

**Date:** \_\_\_\_\_ **Signature** (Parent or Guardian): \_\_\_\_\_

**VOLUNTEERS (please check FDSA web site for volunteer information)**

*The association always needs coaches and volunteers for its programs. We would very much appreciate your involvement. Please indicate your willingness by completing the following.*

I, \_\_\_\_\_ (Tel: \_\_\_\_\_) (Email: \_\_\_\_\_) am interested in volunteering for the following: **Age Group** \_\_\_\_\_ as a  **Coach**     **Assistant Coach**     **Helper**

**NOTE:** *FDSA offers volunteer coaches who complete, or have completed, a coach's certification course a 50% reduction in their child's FDSA fee. This is a great opportunity to learn more about the game of soccer. This rebate will be processed in a timely fashion once the season has begun. Please visit our web site for more information on coaching certification courses and the Coaches' Rebate Policy.*