



WATER POLO

Address: 71 Winegarden Trail, Dundas, ON L9H 7M3

Website: www.hamiltonwaterpolo.ca

HAMILTON AQUATIC WATER POLO CLUB REGISTRATION FORM

New player Returning player

New competitive players are required to provide proof of age by submitting a photocopy of birth certificate at time of registration.

Please check one.

U14 Novice

U18 Competitive

U14 Competitive

Senior

U16 Competitive

Other

For Office Use Only Received/ Issued:

Payment by Cash Cheque Athlete T-shirt

How did you hear about our water polo Club?

Previous Member City Rec Guide Billboard Community paper advertisement The Hamilton Spectator advertisement

Website Family/Friend Word of Mouth Name of Family/Friend/Referral: _____

ATHLETE INFORMATION

First Name: _____ Last Name: _____

Date of Birth: _____ Gender: Male Female
mmmm/dd/yyyy

Street Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Cell: _____ Email: _____

PARENT INFORMATION (if Athlete is under 18 years of age)

Mother: _____ Father: _____

Phone: _____ Phone: _____

Cell: _____ Cell: _____

Email: _____ Email: _____

Street Address: _____ Street Address: _____
(If different from Athlete)

City: _____ Province: _____ City: _____ Province: _____

IN CASE OF EMERGENCY CONTACT (if parents can't be reached first)

First Name: _____ Last Name: _____

Phone: _____ Cell: _____ Relationship: _____

Notice of Warning: There is a potential risk of injury involved in training or participating in the sport of water polo. Ontario Water Polo (OWP) and its members have tried to create a safe and controlled environment for participation. OWP has established rules for participation and conduct on and about the playing area that should be followed. Some hazards which may lead to catastrophic situations are: slips on the pool deck or surrounding area, chlorine leaks, ball injuries and personal body contact injuries, etc. As per the *Personal Information Protection and Electronic Documents Act*, I give permission to Hamilton Aquatic Water Polo Club to enter the required personal information on the Water Polo Canada database which is managed by "Hamilton Aquatic Water Polo Club" (in order to register for liability insurance, a condition of the Hamilton Aquatic Water Polo Club Contracts with area pools). My child and I have read, understood and agree to comply with the Hamilton Aquatic Water Polo Club Code of Conduct (available at www.hamiltonwaterpolo.ca).

Print Athlete's or
Parent's Name
(if Athlete is under 18 years old)

Athlete's or
Parent's Signature
(if Athlete is under 18 years old)

Date

From time to time, photographs of our athletes are used for advertising, media, in programs at events hosted by Hamilton Aquatic Water Polo Club, or on our website. Indicate below if you do not give permission for your child to appear or be identified in photos. Otherwise, permission is assumed.

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Please check and initial all boxes. All policies are available from your Club Registrar and on the OWP (www.ontariowaterpolo.ca) website and Hamilton Aquatic Water Polo (www.hamiltonwaterpolo.ca) website.

<input checked="" type="checkbox"/>	Initial	
<input type="checkbox"/>		I have read and understand the Notice of Warning.
<input type="checkbox"/>		I have read, understand and will abide by the terms and conditions in the Water Polo Canada Code of Conduct as found on www.hamiltonwaterpolo.ca
<input type="checkbox"/>		I have read, understand and agree to the Ontario Water Polo (OWP) PIPEDA Policy (revised September 2004).
<input type="checkbox"/>		Use of Image - by participating in an OWP sanctioned event you have agreed to have your photo taken that could be used for the promotion of Water Polo in advertising posters, flyers, website, media releases, etc. Complete policy on OWP website.
<input type="checkbox"/>		I have read, understand and will abide by the Coaching Code of Ethics from the CPCA (for coaches only).

Print Athlete's or Parent's Name <small>(if Athlete is under 18 years old)</small>	Athlete's or Parent's Signature <small>(if Athlete is under 18 years old)</small>	Date
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VOLUNTEER COMMITMENT

To keep club fees as low as possible, each athlete family will be expected to volunteer within the Club in some capacity. A list of volunteer opportunities for parents will be available. All Competitive athletes will be expected to volunteer with the Novice house league operations, either operating clocks or as referees (training will be provided). Parents of Novice athletes are encouraged to volunteer as coaches with their child's team or with other activities in the Club. **We can find a fit for everyone!**

Our family has read and understood the agreement for Volunteer Commitment for the current water polo season, and agree that our family will assist when asked.

Print Athlete's or Parent's Name <small>(if Athlete is under 18 years old)</small>	Athlete's or Parent's Signature <small>(if Athlete is under 18 years old)</small>	Date
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PERSONAL INFORMATION PROTECTION AND ELECTRONIC DOCUMENTS ACT

Re: Personal Information Protection & Electronic Documents Act (PIPEDA)
Ontario Water Polo's Policy with regard to PIPEDA is posted at www.ontariowaterpolo.ca
under Competitive Programs. Please read it and sign the consent area of this form.

I, _____, give permission to Hamilton Aquatic Water Polo Club to enter required personal information on the Ontario Water Polo Association database for the purposes outlined in Ontario Water Polo's policy, which I have read. I understand that I may withdraw consent at any time upon written notice to the Ontario Water Polo Program Administrator and my personal information will be purged from the database. Withdrawal constitutes de-registration. The Club will be informed immediately upon receipt of the written notice.

Consent is give for myself (parent/athlete/coach) and my (under 18 years of age) child, listed below

Print Parent's Name: _____

Print name(s) of Child (under 18 years old): _____

Signature Parent/Guardian or Participant (where over 18 years old) _____ **Date:** _____