



SCARBOROUGH UNITED WOMEN'S SOCCER CLUB **YOUTH DEVELOPMENT ACADEMY PROGRAMME** **OUTDOOR 2021**

Scarborough United Return-to-Play Format for Outdoor 2021 will take the form of a Youth Player Development Programme only, targeting players born in **2007-2014 (U7-U14)**. Our technical team of coaches will be running the sessions. There will be four divisions: **Under 8 (2013-2014)**, **Under 10 (2011-2012)**, **Under 12 (2009-2010)**, and **Under 14 (2007-2008)**.

PROGRAMME DETAILS: (ACADEMY FORMAT)

**** REGISTRATION DEADLINE
JUNE 25, 2021 ****

WHAT: The Programme (**LIMITED TO 20 PLAYERS** for each division) emphasizes:



- Development of basic skills - shooting, dribbling, passing and receiving.
- Development of technical skills - playing with and without the ball.
- Application of skills to game situations - positioning for attacking and defending.
- Involvement in the basic structure of soccer for 1v1, 2v2, 3v3, 4v4 situations.
- Improvement in physical fitness - stamina, agility, strength and conditioning.

NOTE: The programme is subject to change based on Ontario's COVID-19 Three-Step Reopening Plan.



WHEN: Wednesdays and Fridays for Outdoor 2021, from July 7 to September 24:

- Wednesday evenings from 6:30 p.m. – 8:00 p.m. (Under 8 and Under 10)
- Friday evenings from 6:30 p.m. – 8:00 p.m. (Under 12 and Under 14)

WHERE: Terry Fox Park (West Field No. 1)
Bamburgh Circle East (Warden & Steeles Ave.)



COST: **\$300.00** (Receipts if needed, will be issued at the end of the programme)
Cheques should be made payable to "**Scarborough United**" and mailed to:

SCARBOROUGH UNITED W.S.C., 45 FAIRFAX CRES, SCARBOROUGH ON, M1L 1Z6

- An administrative fee of \$25 will be charged for all NSF cheques returned.
- Requests for refunds will only be considered, if notice is provided in writing prior to June 25, 2021. An administrative fee of \$25 plus the unrecoverable OS / SSA and SportsEngine registration fees will be charged. *No refunds will be issued after this date. In the event that the programme is cancelled prior to the registration deadline date, all cheques will be returned.*

First Name: _____ **Last Name:** _____



Address: _____ **City:** _____

Postal Code: _____ **Telephone: (H)** _____ **(Cell)** _____

Email Address: _____

Birth Date: ____/____/____ **Played with SU before: YES** **NO** **(Please Check One)**
YYYY / MM / DD **If NO, with what Club:** _____



Scarborough United Women's Soccer Club or its agents assume no responsibility for any injuries or happenings however caused to any player and the completion of this form and/or signature will constitute full assumption of acceptance of this provision. In the case of emergency, the Club is authorized to seek medical assistance as deemed necessary.

Parent/Guardian Signature: _____ **Print Name:** _____

Date: _____

ONTARIO SOCCER

INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT

(To be executed by Participants under the age of majority)

**WARNING! By signing this document, you will assume certain risk and responsibilities.
Please read carefully!**

1. This is a binding legal agreement. Clarify any questions or concerns before signing. As a Participant in activities, programs, classes, services provided and events sponsored or organized by Ontario Soccer and its affiliated districts, leagues, clubs and teams (collectively the "Organization") and the sport of soccer, including but not limited to: games, tournaments, practices, training, personal training, dry land training, use of strength training and fitness conditioning equipment, machines and facilities, nutritional and dietary programs, orientational or instructional sessions or lessons, aerobic and anaerobic conditioning programs (collectively the "Activities"), the undersigned being the Participant and Participant's Parent/Guardian (collectively the "Parties") acknowledges and agrees to the following terms outlined in this agreement:
2. I am the Parent/Guardian of the Participant and have full legal responsibility for the decisions of the Participant.

Description of Risks

3. The Parties understand and acknowledge that:
 - a) The Activities have foreseeable and unforeseeable inherent risks, hazards and dangers that no amount of care, caution or expertise can eliminate, including without limitation, the potential for serious bodily injury, permanent disability, paralysis and loss of life;
 - b) The Organization may offer or promote online programming (such as webinars, remote conferences, workshops, and online training) which have different foreseeable and unforeseeable risks than in-person programming;
 - c) The Organization has a difficult task to ensure safety and it is not infallible. The Organization may be unaware of the Participant's fitness or abilities, may give incomplete warnings or instructions, may misjudge weather or environmental conditions, and the equipment being used might malfunction; and
 - d) The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and COVID-19 is extremely contagious. The Organization has put in place preventative measures to reduce the spread of COVID-19; however, the Organization cannot guarantee that the Participant will not become infected with COVID-19. Further, attending the Activities could increase your risk of contracting COVID-19.
4. The Participant is participating voluntarily in the Activities. In consideration of that participation, the Parties hereby acknowledge that they are aware of the risks, dangers and hazards and may be exposed to such risks, dangers and hazards. The risks, dangers and hazards include, but are not limited to:
 - a) Contracting COVID-19 or any other contagious disease;
 - b) Executing strenuous and demanding physical techniques;
 - c) Vigorous physical exertion, strenuous cardiovascular workouts and rapid movements;
 - d) Exerting and stretching various muscle groups;
 - e) The failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
 - f) Spinal cord injuries which may render the Participant permanently paralyzed;
 - g) Serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of the Participant's body or to the Participant's general health and well-being;
 - h) Abrasions, sprains, strains, fractures, or dislocations;
 - i) Concussion or other head injuries, including but not limited to, closed head injury or blunt head trauma;
 - j) Physical contact with other participants, spectators, equipment, and hazards;

- k) Not wearing appropriate safety or protective equipment, such a helmet;
- l) Failure to act safely or within the Participant's ability or within designated areas;
- m) Grass, turf, and other surfaces including bacterial infections and rashes;
- n) Collisions with fences, poles, stands, and soccer equipment;
- o) Negligence of other persons, including other spectators, participants, or employees;
- p) Weather conditions; and
- q) Travel to and from competitive events and associated non-competitive events which are an integral part of the Activities

We have read and agree to be bound by paragraphs 1 and 4

Terms

5. In consideration of the Organization allowing the Participant to participate in the Activities, the Parties agree:
 - a) That the Participant's mental and physical condition is appropriate to participate in the Activities;
 - b) That when the Participant practices or train in his or her own space, the Parties are responsible for the Participant's surroundings and the location and equipment that is selected for the Participant;
 - c) To comply with the rules and regulations for participation in the Activities;
 - d) To comply with the rules of the facility or equipment;
 - e) That if the Participant observes an unusual significant hazard or risk, the Participant will remove themselves from participation and bring such to the attention of an Organization representative immediately;
 - f) The risks associated with the Activities are increased when the Participant is impaired and the Participant agrees not to participate if impaired in any way;
 - g) That it is their sole responsibility to assess whether any Activities are too difficult for the Participant. By the Participant commencing an Activity, they acknowledge and accept the suitability and conditions of the Activity;
 - h) That they are responsible for the choice of the Participant's protective equipment and the secure fitting of the protective equipment;
 - i) That COVID-19 is contagious in nature and the Participant may be exposed to or infected by COVID-19 and such exposure may result in personal injury, illness, permanent disability or death and voluntarily agree to assume all of the foregoing risks.
6. In consideration of the Organization allowing the Participant to participate, the Parties agree:
 - a) That the Parties are not relying on any oral or written statements made by the Organization or their agents, whether in brochure or advertisement or in individual conversations, to agree to be involved in the Activities; and
 - b) That the Organization is not responsible or liable for any damage to the Participant's vehicle, property, or equipment that may occur as a result of the Activities.

We have read and agree to be bound by paragraphs 5-6

General

7. The Parties agree that in the event that they file a lawsuit against the Organization, they agree to do so solely in the province of Ontario, Canada and they further agree that the substantive law of Ontario will apply without regard to conflict of law rules.
8. The Parties expressly agree that this Agreement is intended to be as broad and inclusive as is permitted by law and that if any of its provisions are held to be invalid, the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgement

9. The Parties acknowledge that they have read this agreement and understand it, that they have executed this agreement voluntarily, and that this Agreement is to be binding upon themselves, their heirs, their spouses, parents, guardians, next of kin, executors, administrators and legal or personal representatives.

Name of Participant (print)

Signature of Participant

Date of Birth

Name of Parent or Guardian (print)

Signature of Parent or Guardian

Date

RECEIPT OF REVIEW: CONCUSSION AWARENESS RESOURCE

You MUST review the appropriate Concussion Awareness Resource below, applicable to your age group.

AGES 10 & UNDER:

<https://files.ontario.ca/mtcs-rowans-law-booklet-ages-10-and-under-en-2019-05.pdf>

AGES 11-14

<https://files.ontario.ca/mtcs-rowans-law-booklet-ages-11-to-14-en-2019-05.pdf>

AGES 15 & UP

<https://files.ontario.ca/mtcs-rowans-law-booklet-ages-15-and-up-en-2019-05.pdf>

Thank you for completing your review of the Concussion Awareness Resource.

- Under *Rowan's Law*, your sport organization will ask you to confirm that you reviewed one of the Concussion Awareness Resources in this website (Ontario.ca/concussions) before you can register/participate in a sport.
- You must review one of the resources once a year, and then confirm that you have completed the review every time you register with a sport organization. If you want to use this form to show that you have reviewed the Concussion Awareness Resource, you can provide the completed form to your sport organization(s).
- If you would like to have a record of your review of the Concussion Awareness Resource, you can complete this form and keep it as a receipt to remind you of the date on which you reviewed it.
- Once you complete this form, you can save it (to your personal device/computer) or print this page to share with your sport organization and/or to serve as a reminder of when to review the Concussion Awareness Resources again next year.

Receipt of Review:

I, _____, confirm that I have reviewed a Concussion Awareness Resource.
(Name)

Signature

Date

DISCLAIMER: Your completion of this form will not constitute confirmation that you have reviewed the Concussion Awareness Resources for the purpose of Rowan's Law (Concussion Safety), 2018. If you want to use this form to show that you have reviewed the Concussion Awareness Resources, you must provide the completed form to your sport organization(s). This form will not be saved by the Government of Ontario and the Government of Ontario assumes no responsibility for confirming that you have reviewed the Concussion Awareness Resource.