



(A BRANCH OF ATHLETICS CANADA)

3701 Danforth Avenue, Scarborough, Ontario, M1N 2G2 Phone: (647) 352-7214

Email: office@athleticsontario.ca Website: www.athleticsontario.ca

Membership in Athletics Ontario may be denied if the applicant has a past criminal record.

Specifics and details on this policy can be found at: www.athleticsontario.ca

2021 COACH-ASSOCIATE-OFFICIAL REGISTRATION FORM

MEMBERSHIP TYPE(S): [] COACH (\$25) +ABC [] ASSOCIATE (\$25) +AB [] OFFICIAL (\$20) +AB
*REQUIREMENTS: +CRC / SS / RIS +CRC / SS +CRC / SS

+ADDITIONAL FEES: :+\$15 (Athletics Canada Fee) - Payable one time per year (HST #104002357 RT) +\$5.65 (Safe Sport Levy) - Payable one time per year

REQUIREMENTS FOR MEMBERSHIP

- A. CRC: Criminal Record Check - may submit yours to your Club Registrar or to office@athleticsontario.ca
B. SS: NCCP Safe Sport - This module must be completed and valid. To register for this FREE online module, please visit https://safesport.coach.ca/.
C. RIS: Respect in Sport for Activity Leaders Certification - This module must be completed by all Coaches and renewed every 4 years. Learn more at https://athleticsontario.ca/respect-in-sport/.
ATHLETES: If the applicant wishes to register as an athlete, they must also complete an Athlete Registration form.

Registration form fields including: Athletics Canada #, CLUB NAME, LAST NAME, FIRST NAME, BIRTHDATE, ADDRESS, CITY, PROV, POSTAL CODE, PHONE #, COACH, E-MAIL, E-MAIL 2, EMERGENCY CONTACT, PHONE.

Waiver

In consideration of the acceptance of my application for registration as a member of Athletics Ontario for the 2021 calendar year, I, for myself, my heirs, executors, administrators, successors and assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE Athletics Ontario and its respective agents, officials, employees, contractors, representatives, successors and assigns of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my registration as a member of Athletics Ontario, or my participation in any Athletics Ontario sponsored and/or sanctioned event in the 2021 calendar year, whether prior to, during or subsequent to any such event AND NOTWITHSTANDING that same may have been contributed to or occasioned by the NEGLIGENCE of any of the aforesaid.

IF THIS WAIVER IS ALTERED YOUR REGISTRATION WILL BE REJECTED.

*This form must be signed by both the applicant and, if the applicant is under the age of 18, a parent or legal guardian.

*Upon acceptance as a member of Athletics Canada, Ontario Branch (Athletics Ontario), the applicant agrees to abide by the rules, procedures and Code of Conduct of Athletics Canada and Athletics Ontario.

2021

The ATHLETICS ONTARIO Drug Use and Doping Control Policy & Concussion Awareness Agreement

In consideration of being a member of Athletics Ontario and my subsequent participation in all Athletics Ontario programs, I agree to adhere to and support the Athletics Ontario Drug Use and Doping Control Policy. I acknowledge that I have read and understand the Athletics Ontario Drug Use and Doping Control Policy. More specifically, I agree to support, uphold and abide by the Athletics Ontario Position Statement included in the Athletics Ontario Drug Use and Doping Control Policy.

The athlete and their parent/guardian (if the athlete is under 18 years of age) has reviewed the Minister approved Concussion Awareness Resources available at: https://athleticsontario.ca/safe-sport/

APPLICANT'S SIGNATURE

LEGAL GUARDIAN SIGNATURE (If Applicant is under 18 years of age)

DATED ____/____/____

EXPIRY DATE: 12/21