

Ontario Water Polo Association www.ontariowaterpolo.ca



KW Water Polo Club MEMBERSHIP APPLICATION For Coaches and Referees

☐ New Member ☐ Renewal			
Applicant Information Last Name:	First Na	ame:	
☐ please check if the mailing address be Mailing Address:		,	
City:	Province:_	Postal Cod	e:
Birth date:		Health Insurance #: _	
Home Phone:	Mobile Phone: _		
Email:			
Circle One Primary Membership Categoria	ory C	coach Refe	eree
Emergency Contact			
Name:F		Relationship:	
Phone Number:			

Notice of Warning

There is a potential risk for injury involved in training and participating in the sport of water polo. The Ontario Water Polo Association (OWPA), and its member clubs, have tried to create a safe and controlled environment for participation. The OWPA 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. In part consideration of the KW Water Polo Club permitting me/my child to take part in the practices and other activities of the Club, I hereby release the Club and its employees, agents and volunteers from any and all damages sustained in consequence of loss, injury or damage to any person or property and from any or all actions, causes of action, claims and demands of any nature arising directly or indirectly from my/my child's participation in water polo.

By signing this document I agree to and will abide to all the OWPA policies. If I am a parent/guardian of a minor, I provide consent for my minor child to participate with the OWPA. **Please initial all boxes**.

Have read and understand the Notice of Warning
Have read, understand and will abide by the terms and conditions in the Water Polo Canada Code of
Conduct and The City of Waterloo Respectful Behaviour Policy
I am aware of the OWP PIPEDA policy and give permission to KW Water Polo Club to enter required
personal information on the KW Water Polo Club and Ontario Water Polo Association database for the purposes
outlined in the KW Water Polo Club Policy, which I have red.
I have read, understand and will abide by the OWP Standards of Behaviour
I have read, understand and will abide by the Conflict Resolution Policy and Procedures
I have reviewed the KW Water Polo Code of Conduct (including the Parent Code
of Conduct and Change Room Policy) as found on the KW Water Polo web site.
I acknowledge, I have read and understand and agree to this waiver and release of liability and
authorization in favour of the KW Water Polo Club, its employees, agents and volunteers.
I further authorize the Club, its employees, agents and volunteers to provide medical first aid, which
they deem reasonably necessary for me in the event of my injury during the activities of the Club and I agree to reimburse
the Club for all expenses, incurred thereby.
I verify that the medical information provided on the application is correct and agree that it is my
responsibility to advise the club of any changes. By signing this document I agree to and will abide by all
KW Water Polo Club Policies.
Throughout the year photos and videos may be used in several ways: to highlight players in
newsletters, websites, bulletin board and/or year-end slide show, or to provide local press with photos for feature articles and
promotional materials for the club. I give permission to the KW Water Polo Club and its Board of Directors to have me
photographed and videotaped and such photographs and videos to be used as above.
I am consenting to receive electronic communications related to the Club from KW Water Polo Club and its employees, agents
and volunteers using the e-mail address that I have provided above. I may withdraw my consent at any time by contacting
president@kwwaterpolo.com.
I have read and understand the OWPA Referee Policy (for referees only)
I have read and understand the CACE Code of Conduct and Ethics Code (for coaches only)

Signature:	Date:
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