



# KW Water Polo Club MEMBERSHIP APPLICATION

New Member       Renewal

## Applicant Information

Athlete's Last Name: \_\_\_\_\_ Athlete's First Name: \_\_\_\_\_

*please check if the mailing address below has changed since last registration period*

Home Address: \_\_\_\_\_

City : \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age : \_\_\_\_\_ Gender: \_\_\_\_\_ Health Insurance #: \_\_\_\_\_  
dd/mm/yyyy F/M

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Athlete's Email: \_\_\_\_\_

*Complete this section for U12, U14, U16 and U18 applicants*

Mother's/Guardian's Full Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Father's/Guardian's Full Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Parent Name for Child Fitness Tax Receipt: \_\_\_\_\_

## Check age category

U12       Bantam(U14)       Cadet(U16)       Youth(U18)       Senior

If you have any additional information you would like to supply, please enter it here (allergies, health conditions, etc.).  
Critical information should also be shared in person with the Coach and Team Manager.

## Emergency Contact

Name: \_\_\_\_\_ 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 <b>Notice of Warning</b>
	Have read, understand and will abide by the terms and conditions in the <a href="#">Water Polo Canada Code of Conduct</a> and <a href="#">The City of Waterloo Respectful Behaviour Policy</a>
	I am aware of the <a href="#">OWP PIPEDA policy</a> 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 <a href="#">KW Water Polo Club Policy</a> , which I have read.
	I have read, understand and will abide by the <a href="#">OWP Standards of Behaviour</a>
	I have read, understand and will abide by the <a href="#">Conflict Resolution Policy and Procedures</a>
	We (parent and athlete) have reviewed the <a href="#">KW Water Polo Code of Conduct</a> (including the <b>Parent Code of Conduct</b> and <b>Change Room Policy</b> ) as found on the KW Water Polo web site.
	I/WE acknowledge, I/WE have read and understand and agree to this <b>waiver and release of liability and authorization</b> in favour of the KW Water Polo Club, its employees, agents and volunteers.
	I/WE further authorize the Club, its employees, agents and volunteers to provide <b>medical first aid</b> , which they deem reasonably necessary for me/my child in the event of my or his/her injury during the activities of the Club and I agree to reimburse the Club for all expenses, incurred thereby.
	I/WE verify that the medical information provided on the application is correct and agree that it is our responsibility to advise the club of any changes. By signing this document I/WE agree to and will abide by all KW Water Polo Club Policies.
	Throughout the year <b>player photos and videos</b> 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/WE give permission to the KW Water Polo Club and its Board of Directors to have our player (named above) photographed and videotaped and such photographs and videos to be used as above.
	We (parent and athlete) are 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 or I will provide to the team manager to be added to the team email lists. We may withdraw our consent at any time by contacting <a href="mailto:president@kwwaterpolo.com">president@kwwaterpolo.com</a> .

*Note re: subsidized fees: For those wishing to enroll but unable to afford our registration fees, we do offer, with financial support from the [Kitchener Sports Association](#), subsidized fees and/or payment terms. There are also several sources offering direct individual support, e.g. JumpStart, KidSport, OutReach, etc. If you require assistance, please contact us for more information.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*for U12, U14, U16 and U18 only*

Athlete's Signature: \_\_\_\_\_ Date: \_\_\_\_\_