

Ottawa-Carleton Ultimate Association



Ottawa Carleton Ultimate Association

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2007/2008 Youth Coached

Player Information	
Family Name: _____	(Office Use Only) OCUA Youth # _____ <hr/> Registration: <input type="checkbox"/> Payment: <input type="checkbox"/>
First Name: _____	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Age _____	
Approximate years playing Ultimate: _____	
Address: _____ City: _____	
Postal Code: _____ Home Phone: _____	
Cell: _____ Family e-mail: (print carefully) _____	
Emergency Contact Phone Number (during the game) : _____	
Name of the person and relationship to the child: _____	

Request to play with friend	
Friend #1. _____	Friend #2. _____
Language of instruction: Does not matter <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/>	

Registration Fee	
Merlins (7 – 11) 106.00	Card # _____
Falcons (12 – 16) 106.00	Expiry _____
GST included	
Total \$ _____	Total Payable Cheque <input type="checkbox"/> Visa/Mastercard <input type="checkbox"/>

These fees are eligible for the new Children's Fitness tax credit. See <http://cra-arc.gc.gc/whatsnew/fitness-e.html> for details. To receive a refund of fees paid, notice must be given two weeks prior to the start of a session; a \$20 administration fee will be charged. OCUA reserves the right to ask any participant to leave a team. In such a case a prorated refund will be issued.

Locations (choose 1)			
Orleans - Saturday	Sept 8 – Oct 28	Trillium Park	10:00 – 12:00
Ottawa-South - Saturday	Sept 8 – Oct 28	Potvin	2:00 – 4:00
Ottawa-West - Sunday	Sept 9 – Oct 29	Ben Franklin	10:00 - 12:00
Kanata Sunday	Sept 9 – Oct 29	Walter Baker	2:00 – 4:00

Health	
Does your child have any allergies? Yes: _____	To what? _____
Does your child have any medical conditions? _____	
Does your child have any previous injuries we should be aware of? _____	
Does your child need to wear special gear when participating in sports (braces)? _____	
Family doctor _____	
Health card number _____	

Participant's Agreement (to be used for players under the age of 18)

I understand that I am playing in the league at my own risk and release the Ottawa Carleton Ultimate Association and all organizers from any liability.

I acknowledge Making this agreement: I have read and understood the terms and conditions of this agreement and by signing it voluntarily, I am agreeing to abide by these terms.

I certify that the information supplied is accurate.

Parent's Signature: _____	Date YY _____ MM _____ DD _____
Child's Signature: _____	Date YY _____ MM _____ DD _____

If you would like to volunteer, please check box

