



GENERAL INFORMATION & CONSENT TO PARTICIPATE 2012/13 SEASON

Dear Team Members and Parents,

Welcome to Halton Hurricanes Volleyball!

Please read & fill out the information on both sides. Provide your signature(s) where required, indicating your approval for your daughter to participate. This form will accompany your daughter's TEAM COACH.

ELEMENTS OF RISK

This sporting activity may involve certain elements of risk and therefore, accidents may occur while participating in this activity. These accidents may cause injury. A few examples of the type of injuries which one is at risk of having while participating:

1. Pedestrian/ Traffic related (e.g. bumps, bruises, to more serious injuries affecting the head, neck or back. Some injuries could lead to paralysis or prove to be life threatening).
2. Activity related (e.g. minor strains and sprains, to more serious injuries).

These accidents result from the nature of the activity and can occur without any fault on either the part of the player, or the Halton Region Volleyball Club (HRVC) or its parent chaperones, or the facility where the activity is taken place. By choosing to participate in this activity, you are assuming the risk of an accident occurring. The chance of an accident occurring can be reduced by carefully following instructions at all times while engaged in the activity.

PLAYER ACCIDENT INSURANCE

The OVA Insurance Program is available to fully registered members of the Ontario Volleyball Association. The OVA Insurance Program outlines sports liability and sport accident coverage. More information at www.ontariovolleyball.org.

OUT OF PROVINCE MEDICAL INSURANCE

For any out of province trips, it is the responsibility of each player in these activities to source their own Health Care Insurance.

PARENTAL & PLAYER SIGNATURES ARE REQUIRED FOR PLAYER PARTICIPATION

ACKNOWLEDGEMENT, PERMISSION & CODE OF CONDUCT AGREEMENT

I / we hereby give permission for my / our daughter to participate in the above activity. I / we have read the foregoing, and understand that by participating in the above activity, we are assuming the risks associated with doing so. Furthermore, the Team Member hereby agrees to conduct herself in a mature and responsible manner that is befitting a representative member of the HRVC.

Code of Conduct:

Work for the good of your team

Conduct yourself with honour and dignity

Honestly and whole heartedly applaud the efforts of your team mates and opponents

Respect your Coaches, team mates, club and officials

However, in the event of misconduct, I / we agree to pay any damages that may be occasioned through the misconduct or carelessness of my daughter to the person or property of any other parties. Further, HRVC has the right to notify the athlete of early termination (forfeiture of all fees) based upon grounds of misconduct, or other unsatisfactory circumstances.

Signature of Team Member _____ Date _____

Signature of Parent/Guardian _____ Date _____

FREEDOM OF INFORMATION & SHARING OF INFORMATION (optional signature)

The information provided on this form is protected under the Freedom of Information and Protection of Privacy Act and will be utilized only for the purposes related to activities in conjunction with HRVC. I / we hereby permit HRVC coaches to share my daughter's contact information with her respective team members, in the form of a team contact list, as well as permission to (possibly) posting her image on our Club website, in the form of tournament related pictures.

Signature of Parent/Guardian _____ Date _____

