

Coaches Clinic

Applicant Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone No: _____

Email: _____ Cell No: _____

Clinic Location: Metro Sports Centres
1510 Birchmount Road unit 150
Scarborough, ON, M1P 2G6
www.metroportscentres.com

One Day Community Children 's Course

Date: Saturday July 12, 2008

Time: 8am -6pm

Cost: \$ 165.00 (includes GST)

Working Lunch: Coaches must bring their own lunch

CHILDREN'S COURSE - INTRODUCTION TO COACHING: Coaches Working with children 6- 10 Yrs. should complete Community Children's Coach Course.

One Day Community Youth Course

Date: Sunday July 13, 2008

Time: 8am -6pm

Cost: \$ 165.00 (includes GST)

Working Lunch: Coaches must bring their own lunch

YOUTH COURSE - YOUTH COACHING METHODOLOGY: Coaches working with Youth players 10 - 14 Yrs. should complete up to and including the Youth Two Community Coach Course.

Applicant must bring their own LUNCH, soccer ball, soccer attire and indoor/turf boots. Please note that applicant must attend clinics in the proper sequence, Childrens, Youth and then Senior. Participants must be 16 years of age as of January of the current season. Applicant must also provide proof of previous Clinic.

I have enclosed a total deposit in the amount of \$_____ Cheque No. _____

(Metro Sports Centres only accepts Cash or Cheque for payment.

CHEQUE MUST BE MADE OUT TO Metro Sports Centres – NO POSTDATED CHEQUES)

REGISTRATION IS ON A FIRST COME FIRST SERVED BASIS, SPACE IS LIMITED MAXIMUM 25 SEATS (Senior max is 20). APPLICATIONS AND PAYMENT MUST BE DELIVERED TO METRO SPORTS CENTRES BETWEEN 6PM – 10PM MONDAY-FRIDAY TO CONFIRM YOUR REGISTRATION.

Signature of Applicant: _____ **Date:** _____

MSC WAIVER FORM

RELEASE OF WAIVER FROM LIABILITY

The undersigned expressly acknowledges that sports and similar activities involve risk of physical injury greater than those encountered in daily life, and by participating in sports and other activities, members acknowledge and assume the risk inherent therein. Metro Sports Centres Inc. (MSC) accept no responsibility, and shall not be liable, for any injury, illness, death, damage, loss, accident, expense, delay, or other irregularity resulting from a registered member's participation in any activity or use of any of the facilities at MSC. In consideration of being permitted to enter and use the facilities at MSC, the undersigned HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE MSC, its officers, directors, employees, agents, servants and/or assigns for any and all damage, and any claim or demand therefore on account of INJURY or resulting DEATH of the registered member, of damage to property whether caused by the NEGLIGENCE OF MSC or otherwise while the registered member is in the facilities at MSC. Additionally, the undersigned hereby authorizes MSC to utilize the registered member's name and/or photographic or verbal representation by any media format (i.e. video taping, audio taper interviews, photographs, etc) in the promotions of the programs of MSC. Also, each registered member acknowledges the rules of participation and safety of MSC and agrees to follow all such rules.

SIGNATURE _____

PRINTED NAME _____

DATE _____