



Regina West Zone Community Soccer Assoc. 2025 Registration Form

See our website: <https://RWZCSA.CA>

To Register

Online Registration **Go to RWZCSA.ca**

Mail in Registration Box 35022, Sherwood village RPO
Regina, SK, S4X 4C6

In Person Registration Saturday, March 2; 10am to 1pm
North West Leisure Centre

FEES

3Yr, 4Yr, 6U	90.00
8U, 10U	110.00
12U, 15U and 18U	130.00

INFORMATION ON THIS FORM WILL ONLY BE DISTRIBUTED TO THE COACH OF YOUR CHILD'S TEAM

Name _____ Sex _____
Surname First

Address _____ Postal Code _____ Phone _____

E-Mail _____ School _____

Birthdate ____ / ____ / ____ Parent's Name _____
MM DD YY

Are there any medical conditions of which the coach should be aware? YES NO
 (If Yes, please indicate on back of form)

AGE GROUP by Year of Birth (Check one)			
3 Year Olds (2022)		10U (2015/16)	
4 Year Olds (2021)		12U (2013/14)	
6U (2019/20)		15U (2010/11/12)	
8U (2017/18)		18U (2007/08/09)	

ITEM	NEEDED
Community Membership #	
Registration Fee	\$
Purchase Community Membership (\$10.00)	\$
Players Skills Clinic (8U&10U only - \$20)	\$
TOTAL (Please Submit)	\$
Make CHEQUES payable to R.W.Z.C.S.A ALL RETURNED CHEQUES SUBJECT TO \$25 FEE Cash accepted only at in-person registrations.	

CONSENT (Signature Required)

I acknowledge that the RWZCSA collects personal information from its participants for administrative purposes. The use of this information is only for advancing the goals of the RWZCSA and to facilitate communication between the RWZCSA and its participants. The RWZCSA will not disclose personal information to any third parties for any purpose unless legally required to.

I acknowledge that RWZCSA may use photographs or video of my child(ren) taken by league officials during their participation in RWZCSA activities. These images will only be used for the purposes of promoting the goals of RWZCSA. I understand that my child will not be identified in any of these photographs/videos without my permission.

I acknowledge that parents or guardians may take photos or videos of their **OWN** child(ren) while participating in RWZCSA soccer and use these materials as they see fit. Personal privacy of others is to be respected and photographs or videos of any other children or youth involved in RWZCSA soccer are **NOT** permitted under any circumstance and materials containing images of other participants are **NOT** to be uploaded to social media platforms or the Internet.

I agree to abide by all rules set out by the league and will comply with the Code of Conduct.

I, _____ hereby consent to the above and have _____ (player/self) playing in the RWZCSA for the 2024 season. I hereby release the league and its officials, coaches, and referees from all liability in respect to any injury sustained while playing in the league.

 Parent/Guardian/Self signature (Waiver must be signed before player is allowed to participate)

COACHES

I will be a Coach _____ I will be an Assistant Coach _____ Age Group(s) _____
 Coach's Name: _____ E-mail: _____ Phone: _____
 As Coach, I consent to have my name & phone number on website. _____
 Coach signature: _____

VOLUNTEERING OPPORTUNITIES

Board positions to plan the season - ongoing	Committee positions to support games and tournament - ongoing
Equipment Preparation - (3hrs) NWLC	Tournament Set up – June 20 4:00PM (3 hours) Flexible start times
Equipment Handout - April 15 6:30PM (3hrs) NWLC	Tournament Support – June 21 7:00 AM – 3:30 PM (Multiple Shifts) St Jerome School
Equipment Handout April 16 6:30PM (3hrs) NWLC	Tournament Tear-down – June 21 3:00 PM (3 hours) St Jerome

We will be in contact if you have selected a volunteering opportunity.

PLAYER REQUEST

If you or your child is requesting to play with another player, please provide

Name: _____ School: _____

Please note request may not be granted depending on circumstance. Coaches/ Assist Coaches will be accommodated first. Only those with cross matches will be considered.