	2021	ATHLETE REGISTRATION FORM
	2021 Fee Schedule (HST #' https://athleticsontario.ca/ath	2
	ATHLETE TYPE: (CHECK ONE	
(A BRANCH OF ATHLETICS CANADA) 3701 Danforth Avenue, Scarborough, Ontario, M1N 2G2 Phone: (647) 352-7214 Email: office@athleticsontario.ca Website: www.athleticsontario.ca Website: www.athleticsontario.ca Competitive Club athletes MUST name an AO registered coach (or a foreign coach who is a member of his/her governing body)	·	JAN-DEC (FULL YEAR) APR-DEC (OUTDOOR) SEPT-DEC (XC)
		8 (2014 or later) U14 (2008-09) U20 (2002-03)   10 (2012-13) U16 (2006-07) Open (2001 or earlier)   12 (2010-11) U18 (2004-05) Masters (30+ years)   to a new club during the calendar year should read the AO
	Transfer Policy on our we	Prage please visit https://athleticsontario.ca/insurance-information/
CLUB NAME		
(If unattached or self-coached unattached, please indicate this in CLUB NAME box)		
LAST NAME COUNTRY OF BIRTH		
FIRST NAME CITIZENSHIP		
BIRTHDATE YYYY/MM/DD GENDER M F		
ADDRESS		
CITY. PROV POSTAL CODE		
PHONE # ( ) - COACH		
E-MAIL 2		
EMERGENCY CONTACT PHONE ( ) -		
Waiver In consideration of the acceptance of my application for registration as a member of Athletics Ontario for the 2021 calendar year, I, for myself, my heirs, executors, administrators, successors and assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE Athletics Ontario and its respective agents, officials, employees, contractors, representatives, successors and assigns of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my registration as a member of Athletics Ontario, or my participation in any Athletics Ontario sponsored and/or sanctioned event in the 2021 calendar year, whether prior to, during or subsequent to any such event AND NOTWITHSTANDING that same may have been contributed to or occasioned by the NEGLIGENCE of any of the aforesaid.		2021 The ATHLETICS ONTARIO Drug Use and Doping Control Policy & Concussion Awareness Agreement In consideration of being a member of Athletics Ontario and my subsequent participation in all Athletics Ontario programs, I agree to adhere to and support the Athletics Ontario Drug Use and Doping Control Policy. I acknowledge that I have read and understand the Athletics Ontario Drug Use and Doping Control Policy. More specifically, I agree to support, uphold and abide by the Athletics Ontario Position Statement included in the Athletics Ontario Drug Use and Doping Control Policy. The athlete and their parent/guardian (if the athlete is under 18 years of age) has reviewed the Minister approved Concussion Awareness Resources available at: https://athleticsontario.ca/safe-sport/
IF THIS WAIVER IS ALTERED YOUR REGISTRATION WILL BE REJECTED.		
*This form must be signed by both the applicant and, if the athlete is under the age of 18, a parent or legal guardian.		APPLICANT'S SIGNATURE
*Upon acceptance as a member of Athletics Canada, Ontario Branch (Athletics Ontario), the applicant agrees to abide by the rules, procedures and Code of Conduct of Athletics Canada and Athletics Ontario.		LEGAL GUARDIAN SIGNATURE (If Applicant is under 18 years of age)
*Once an Athlete has signed with a club for a transfer to another club during the calendar ye club's permission) and compete for the remain disassociated athlete.	ar but can leave the club (with the	DATED / EXPIRY DATE: 12/21 When complete forward this form & fee to your club registrar. Club Registrar - Please note that this form is a legal document and must be kept for at least 10 years
UNATTACHED ATHLETES ONLY: Send the completed form & fee to the AO office for processing.		