



**CORNWALL DISTRICT SOCCER LEAGUE**  
**PLAYER REGISTRATION**  
**2024 SEASON**



**PLAYER DETAILS (PLEASE PRINT IN BLOCK LETTERS)**

First Name:                 Last Name:

Street Address:                      Apt #:

City:                 Postal Code :       Province:

Home Telephone:    -    -    Alternate Telephone:    -    -

Date of Birth:         Sex:  or  Returning Player:  New Player:   
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I currently have outstanding discipline with another senior soccer league (Indoor or Outdoor)

League Name:

**OPTIONAL INFORMATION:**

E-MAIL:

**LEAGUE INFORMATION: CORNWALL DISRICT SOCCER LEAGUE -- C.D.S.L.**

TEAM NAME

DIVISION:  MEN'S DIVISION  LADIES DIVISION

**WARNING -- WARNING -- WARNING -- WARNING -- WARNING -- WARNING -- WARNING -- WARNING -- WARNING -- WARNING -- WARNING -- WARNING**

ANY PERSON WHO PROVIDES FALSE INFORMATION OR WITHHOLDS ANY OF THE REQUIRED INFORMATION SHALL BE SUSPENDED FROM ALL SOCCER ACTIVITIES FOR ONE YEAR

THE C.D.S.L. HAS TRIED TO CRATE A SFAE PLAYING ENVIROMENT FOR ALL PARTICIPANTS. HOWEVER AS IN ANY SPORT, THERE IS POTENTIAL RISK INVOLVED IN TRAINING AND PARTICIPATING. THE LEAGUE AND COACHES HAVE ESTABLISHED RULES FOR PARTICIPATION AND PROPER CONDUCT ON OR ABOUT THE PLAYING AREA. BY REGISTERING YOU AGREE TO UPHOLD THESE RULES AND FURTHER TO HOLD THE C.D.S.L. BLAMELESS FOR ANY INJURIES.

DATE RECEIVED:            
D D M M Y Y Y Y

SIGNATURE OF REGISTRAR

SIGNATURE OF PLAYER