



NSA CANADA
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 www.nsanacanda.ca



TEAM NAME	LEAGUE NAME	PROVINCIAL DIRECTOR
TEAM CLASS	LEAGUE REP	REGIONAL DIRECTOR
CITY / PROVINCE	SANCTION NUMBER	
DATE		

NSA Privacy Policy at www.nsanacanda.ca/privacy.htm

TEAM MANAGER AND PLAYERS READ THE FOLLOWING STATEMENTS BEFORE COMPLETING AND SIGNING

In consideration of being in NSA Canada, I hereby agree for myself, successors, heirs and assigns, release and forever discharge NSA Canada, their employees, officers and directors, from all claims, actions or judgments I may have or claim to have against NSA Canada for all personal injuries, including death, and injuries to property, real or personal, caused by or arising out of my participation in NSA Canada - either leagues or tournaments. I further agree

for myself, successors, heirs and assigns to indemnify and hold NSA Canada harmless from all claims and suits for personal injuries, including death, damages to property caused by my act of omission arising out of participation in NSA Canada, and from all judgment recovered and from all expenses incurred in defending said claims. I further agree that my photograph, pictures, slides or movies taken or made by NSA Canada, their employees, officers, and

directors, in connection with my participation with NSA Canada either leagues or tournaments or any reproduction of the same, as well as my name, may appear in any manner be used by NSA Canada, or by any person, corporation or association authorized by NSA Canada. I am in good health and have no physical condition that would prevent me from participating in NSA Canada events I, THE UNDERSIGNED, HAVE READ AND UNDERSTOOD THE FOREGOING RELEASE.

PRINT PLAYER'S NAME	PLAYER'S SIGNATURE	HOME PHONE	STREET ADDRESS, CITY/TOWN, PROVINCE	POSTAL CODE	E-MAIL <small>By entering your address you are automatically enter into our monthly draw for NSA prizing</small>
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NSA CANADA REQUIREMENTS: ROSTERS must be signed by all players. The player is automatically ineligible if a signature appears on more than one roster, unless the player has a written release dated and signed by the team for which the player will not be a member. The release must be filed with the Regional Director before the teams play in a tournament leading to a Provincial or National Championship. Team roster must be submitted to the Regional Director upon qualifying for a Provincial or National Championship. TEAM MEMBERS MAY BE ASKED TO PROVIDE I.D. UPON REQUEST.

TEAM MANAGER AFFIDAVIT

I am the manager of the above team and guarantee all of the information supplied above is correct to the best of my knowledge and that all of the players signed above in their handwriting and they are eligible to compete with my team in the championship play of NSA Canada.

()	DAYTIME TELEPHONE NUMBER	()	EVENING TELEPHONE NUMBER
STREET NAME		EMAIL	
CITY/TOWN	PROVINCE	POSTAL CODE	
<input type="checkbox"/> EMAIL ME THE NSA NEWSLETTER <input type="checkbox"/> SEND ME MY FREE FUNDRAISING SAMPLE KIT & NSA CANADA T-SHIRT			

MANAGER'S NAME - PRINT PLEASE

SIGNATURE OF THE TEAM'S MANAGER