

# BURNABY WATER POLO CLUB

September 2018 to August 2019

<b>Development</b> 2009 and younger	<b>12U Age</b> 2007 & later	<b>14U Age</b> 2005-2006	<b>16U Age</b> 2003-2004	<b>18U Age</b> 2001-2002	<b>Open</b> 2000 and older
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Name of Player	New player _____
Date of Birth (dd/mo/yyyy)	
Personal Health Number (Care Card)	M _____ F _____
Any Medical Conditions	
Address Apt. # /House # /Street	
City	
Postal Code	
Phone Number	
Alternate Number	
Email Address	
Parents' Full Names	

**\*\*\*all information must be completed. Incomplete forms cannot be processed.**

I certify that the above information is correct to the best of my knowledge and that as the parent/guardian of the above named player, hereby give approval to his or her participation in all Water Polo activities. I assume all risk and hazards incidental to such participation and to traveling to and from activities, and I do hereby waive, release, absolve, indemnify the organizers, coaches, managers, referees, assisting or participating parents and persons transporting our son or daughter to or from activities, for any claim arising out or any injury to our son or daughter.

*The placement of players on teams is based on age, ability and the objective of forming balanced teams. The club cannot guarantee to satisfy requests with regard to team placement.*

\_\_\_\_\_  
SIGNATURE OF PARENT

\_\_\_\_\_  
DATE

**Parent volunteer help is needed and parents will be asked to help with recording & timing, pool setup and phoning.**

\*\*\*\*\*THIS SECTION FOR OFFICIAL USE ONLY\*\*\*\*\*

Amount paid: \$ \_\_\_\_\_

for the following player(s): \_\_\_\_\_  
\_\_\_\_\_

by cheque # \_\_\_\_\_ cash \$ \_\_\_\_\_

Authorized Club Signature: \_\_\_\_\_ Date: \_\_\_\_\_



BRITISH COLUMBIA  
**WATERPOLO ASSOCIATION**

**BC Water Polo  
Privacy of Information Consent Form**

The BC Water Polo Association collects, uses and discloses your personal information for the purposes of registration, administrative and competitive functions of the aquatic programs within the BCWP Association and its member clubs. The Clubs' privacy act Policy and Procedures adhere to the requirements of the Personal Information Protection Act of B.C.

It is a requirement of registration that the information be provided and that it will only be used for the purposes indicated. By your signature on this form you signify your consent to the collection, use and release of your personal information to BCWP A and its member clubs in accordance with the Club's Privacy Policy. A parent or legal guardian must sign if the applicant is under 19 years of age.

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Signature of Applicant or Parent/Guardian

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Print Name of Applicant

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Date

**Lower Mainland Water Polo League**  
Code of Conduct

**Participant (includes athletes, coaches, and officials) Responsibilities:**

1. As a player participating in the Lower Mainland Water Polo League (LMWPL), there will be **ZERO TOLERANCE** for overly aggressive/physical play as it compromises any player's right to a safe and enjoyable game.
2. Any punching or similarly violent act will result in immediate ejection from the game and the incident will be subject to review according to LMWPL Discipline Procedures.
3. Participants are required to conduct themselves in a sportsmanlike manner. Failure to act appropriately will result in review according to LMWPL Discipline Procedures and/or individual member clubs bylaws.
4. Any questionable incidents during LMWPL games require follow up by a written incident report by the referees and coaches present during the game period. Incident forms are to be kept at all pools, or obtained from club president.
5. The club has a zero tolerance policy regarding any player, coach or parent taking pictures in the dressing room. If any pictures are taken in the dressing room the club reserves the right to confiscate the phone in question to insure that any pictures will be erased and the person who takes the pictures will be subject to sanctions by BC Water Polo. If there is enough evidence to suggest that a picture has been taken of anyone in dressing room unclothed, it will be reported to the authorities forthwith.
6. All practices end at the time specified in the schedule. Parents, or guardians must be ready to take custody of the kids immediately after practice or game. The club is not, and cannot be responsible for any incidents happening after the practice. The Club is not responsible for any incidents that may happen after the practice or game, in hot tub or change rooms.
7. Participants involved in incidents should issue apologies.

I, \_\_\_\_\_, acknowledge that I have read and understand the LMWPL Participant Code of Conduct and agree that I will comply with these responsibilities.

Signature of Participant (if over 19): \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, acknowledge that I have read and understand the LMWPL Participant Code of Conduct.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
(in the case of participants under the age of 19)

**MEDIA RELEASE**

I hereby grant BWPC and/or news media permission to videotape/photograph/interview my child including the use of their full name and home community information. It is my understanding that recordings/photographs and interviews, or portion thereof, will be used for public view (brochures, promotional material, newspapers, television, internet and any media which may be developed in the future) to promote the sport of water polo.

I hereby waive any rights to compensation and ownership

	YES	NO
Permission for video taping		
Permission for photos		
Permission for interviews		

Name of athlete	
Address	
Telephone	
Date	
Signature of parent or guardian	

**RECEIPT**

**PROGRAM: BURNABY WATER POLO –2018 - 2019 SEASON**

PAYEE: \_\_\_\_\_

CHILD’S NAME: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_ AMOUNT PAID: \$ \_\_\_\_\_

CHILD’S NAME: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_ AMOUNT PAID: \$ \_\_\_\_\_

CHILD’S NAME: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_ AMOUNT PAID: \$ \_\_\_\_\_

CHILD’S NAME: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_ AMOUNT PAID: \$ \_\_\_\_\_

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SIGNATURE OF REGISTRAR – Lia Pereira

DATE OF ISSUE: \_\_\_\_\_

**100% of fees are eligible for the Children’s Fitness Tax Credit**

**Burnaby Water Polo Club**

**PO Box 50039**

**South Slope RPR**

**Burnaby, B.C.**

**V5J 5G3**