

Greater Kingston Senior Soccer Association

Senior Player Registration Sheet

Surname _____

Given name _____

Date of birth _____
Day Month Year

Photo
Here

*I hereby agree to abide by the Constitutions of
the Greater Kingston Senior Soccer Association
and the Ontario Soccer Association.*

Signature

Team _____

INDOOR | OUTDOOR Division _____

GKSSA Authorization

Validation

Date



Team _____

INDOOR | OUTDOOR Division _____

GKSSA Authorization

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Date



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1. This form must be produced upon request of an authorized official at any game played under the jurisdiction of the Greater Kingston Senior Soccer Association or its members.
2. This form must be produced when the bearer appears before a discipline hearing conducted by the Greater Kingston Senior Soccer Association, its members, or its authorized representative.
3. This form remains the property of the player, but may be withdrawn by the GKSSA at any time.

Disciplinary Record