OSOYOOS INTERNATIONAL CURLING CLUB 2013_2014 JUNIOR LEAGUE REGISTRATION FORM (AGES: 8 – 18 YEARS)

OFFICE USE ONLY
DATE:
AMOUNT PAID:
METHOD:
INITIALS:

PARTICIPANT INFORMATION: (PLEASE PRINT)

1	Internationa	
2=	International Curling Club	b

N аме:					
DATE OF BIRTH: (YYYY/MM/DD)			Age:		
SCHOOL ATTENDING:			GRADE:		
YEARS OF CURLING EXPERIENCE:			POSITION PLAYED:		
Interested in being on a Travel Team 1x a month:		YES No			
PARENT/GUARDIAN INFORMATION: (PLEASE PRINT)					
N аме:					
Address:					
Postal Code:		PHONE:	CELL:		
EMAIL ADDRESS:					
Parent/Guardian Signature					
MEDICAL INFORMATION (PLEASE PRINT)					
EMERGENCY CONTACT:					
HOME PHONE NUMBER:			CELL:		
ALTERNATE NAME:		_			
ALTERNATE PHONE NUMBER:			CELL:		
Allergies:					
MEDICATIONS:					
Does the Participant carry and know how to administer his/her own medication:yesNo					

JUNIOR FEES: \$60.00 PLUS GST = \$63.00 PER PLAYER
LEAGUE STARTS: TUESDAY OCTOBER 15th - February 25th, 2014
Time: Tuesday 3:15 p.m. - 4:15 p.m.
YEAR END BONSPIEL MARCH 1st, 2014.