

REGISTRATION FORM

Location: Rex Stimers Arena, St. Catharines

Time: Wednesdays 8:15 – 9:15pm

Season: Oct. 5, 2016 – Mar 29, 2017.

APPLICANT INFORMATION

Skater's name: _____ D.O.B: *dd/mm/yyyy*

Parent/Guardian's name (if under 18): _____

Street address: _____ Email: _____

City/Town: _____ Prov/State: _____ Postal/Zip Code: _____

Home Ph. _____ Cell Ph. _____ Talk Text *(Please circle)*

INTEREST & SKATING EXPERIENCE

Recreation _____ Competition *(Please circle)*

Hockey _____ Figure skating _____ Speed skating *(Please circle)* How long? _____

EMERGENCY CONTACTS

Name (relationship): _____ Phone: _____

Name (relationship): _____ Phone: _____

Family Doctor's name: _____ Phone: _____

MEDICAL INFORMATION – SEE OVER

(IT IS THE RESPONSIBILITY OF THE SKATER (PARENT) TO ENSURE THEIR FAMILY DOCTOR APPROVES OF THE ACTIVITIES AND ENVIRONMENT FOR SPEED SKATING)

Medications: _____ Allergies: _____

Recent injuries: _____ Health concerns: _____

MEMBERSHIP AND RENTAL FEES

ALL FEES MUST BE PAID PRIOR TO PRACTICES AND COMPETITIONS!

<i>(Please circle)</i>	Payment 1 due Oct. 5, 2016	Payment 2 due Jan 4, 2017	OR lump sum due Oct. 5, 2016
Adult membership:	\$265.00*	\$165.00	\$405.00*
Junior membership (18 and under):	\$250.00*	\$150.00	\$380.00*
Speed skate rental fees:	\$75.00	\$75.00	\$130.00
Total:			

*Note: The Ontario Speed Skating Association (OSSA) mandatory yearly membership fee of \$100.00 is included in the price.

Note: Students under 25 who are registered full time in a university or college should contact Niagara Speed Skating Club to inquire about student memberships.

OFFICE USE ONLY

Payment 1 type: cash cheque Date rec'd: _____ Cheque #: _____

Payment 2 type: cash cheque Date rec'd: _____ Cheque #: _____

OVER ----->

REGISTRATION FORM CONTINUED

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MEDICAL INFORMATION

DUE TO THE PRIVACY ACT, WE NO LONGER COLLECT HEALTH CARD INFORMATION FROM THE MEMBERSHIP. THEREFORE, ALL MEMBERS NEED TO HAVE THEIR HEALTH CARD NUMBER AND CONTACT NUMBER AVAILABLE AT ALL PRACTICES AND COMPETITIONS.
AN ADULT MUST ACCOMPANY ALL MINORS TO PRACTICE AND COMPETITIONS.

WAIVER

In consideration of you accepting this application, I hereby for myself and my heirs, executors and administrators, waive and release any and all right and claims for damage I may have against the Niagara Speed Skating Club, the Ontario Speed Skating Association, and Speed Skating Canada or on any speed skating Organization, their respective directors, officers, agents, representatives or successors for injuries suffered by me during club organized training, practice and competition events.

I give permission to:

- use my name, address, email, and phone number in our member email group for club updates.
- post pictures, videos and event results of my child / myself on the club's website, in or at the club's arenas, in the local newspapers and on photo and video sharing websites, without express written permission.

REGISTRATION DECLARATION

I have read and agree to the waiver conditions on this form.

Signature of Skater 18 years or older / Parent or Guardian if Skater is under 18 years

Date