

Peace Wapiti Speed Skating Club Registration Form 2017-2018

Skater's Last Name:					
Mailing Address:					
City/Town: Postal Code:					
Email Address:					
Telephone Number: Emergency Contact Number:					
Name of Parent/Guardi	ian:				
Doctors Name:					
Skater's First Name	Birthday	Gender:	Alberta Health Care #	Medical Problems/Allergion	
	(yyyy/mm/dd)	M or F			
CONSENT:					
Wapiti Speed Skating Cl release the Club, its dire injury that may occur to	lub. I assume all risks, i ectors and members fron the applicant. I under out-resistant mitts or glo	including goin om any claims rstand that ska ves at all time	cicipate in any and all active g to and from Club functions or any blame arising out of aters must wear helmets, it is when skating and will er gractivities.	ns, and I hereby of any loss or neck guards, shin	
Signature of the Particip	pant or Parent/Guardia	n if under 18	years of age:		
		Date Signed:			
Deposit for Rental Equi	pment (\$125)- Cheque		d for April 30, 2018		