



# Junior Curling Registration

2021 - 2022 Season

|  |                      |            |                      |
|--|----------------------|------------|----------------------|
| Last Name  | <input type="text"/> | First Name | <input type="text"/> |
| Parents Name   | <input type="text"/> |            |                      |
| Mailing Address  | <input type="text"/> |            |                      |
| Phone (CELL)   | <input type="text"/> |            |                      |
| Parent E-mail  | <input type="text"/> |            |                      |
| Birthdate (M/D/Y)  | <input type="text"/> | Sex (M/F)  | <input type="text"/> |
| School   | <input type="text"/> | Grade      | <input type="text"/> |
| <input type="text"/>   |                      |            |                      |
| Allergies or Medical Conditions                                |                      |            |                      |
| <input type="text"/>   |                      |            |                      |
| We need volunteers, could you let us know when you could help? |                      |            |                      |
| <input type="text"/>   |                      |            |                      |

### REGISTERING FOR:

- MONDAY  
Mini's (8-12 years)  
Less than 2 years experience
- TUESDAY  
Advanced Mini's (8-12yrs)  
2+ years experience  
Junior / High School

### CURLING EXPERIENCE

- None
- 1 year
- 2 years
- 3+ years

|           |
|-----------|
| Payment   |
| Amount \$ |
| Type      |

|             |                        |                        |                             |
|-------------|------------------------|------------------------|-----------------------------|
| <b>Fees</b> | <b>Single \$115.00</b> | <b>Family \$200.00</b> | <b>All fees include GST</b> |
|-------------|------------------------|------------------------|-----------------------------|

THE FOLLOWING DOCUMENTS MUST BE SIGNED AND RETURNED WITH REGISTRATION

|  |  |
|--|--|
|  | COPY OF INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT FOR PARTICIPANTS UNDER THE AGE OF MAJORITY |
|  | DECLARATION OF COMPLIANCE - COVID-19   |
|  | VACCINATION STATUS MEMBER CONSENT FORM   |

|                                 |       |
|---------------------------------|-------|
| _____                           | _____ |
| Signature of Parent or Guardian | Date  |

**Required Equipment for Curlers - Clean rubber soled shoes and loose athletic clothing.  
Helmets required for all mini-rockers**

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| Questions? Contact Crystal Sherwick (403) 528-2454 or Vicki Sjolie @ MHCC (403) 526-3821<br><a href="mailto:email_sherwick@telus.net">email_sherwick@telus.net</a> or <a href="mailto:manager@mhcurling.com">manager@mhcurling.com</a> |
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