

Preference will be given to <u>returning members</u> who register by completing this form in its entirety and submit their \$50 deposit before May 15<sup>th</sup> 2018.

New membership (requests) will be accepted subject to availability.

Full Name:	Provide complete first and family name							
E-mail:	Please <i>PRI</i>	<b>INT CLEARLY</b> or yo	ur regist	ration is not o	considere	ed valid		
Returning Men	nber 🔲	New Members	ship (requ	uest)	<u>Cu</u>	rling Experie	ence:	Year(s
Complete A	<b>A.</b> or <b>B.</b> (b)	elow)						
A. FULL OR	PARTIAL 1	TEAM ROSTER						
Team Name: _		<i>Skip</i> :			Thir	<b>d</b> :		
		Second:			Lead	d:		
B. <u>INDIVID</u>	UAL LOOK	ING FOR A TEA	. <mark>M</mark> , plea	se select pre	eferred	team positi	ion(s)	
Skip	Third	Second		Lead	1			
Waiver and Pi	_	-	ш	Lead	_			
•I WAIVE ANY AN representatives •T0 RELEASE the expense that I ma Rockers Curling Le DUTY OF CARE, A Curling League an •T0 HOLD HARMI property damage or associated with •I further state th that participation •I have read and which I or any he representatives.  Privacy Policy a information for an third parties. Continuous Control of the control of th	Rainbow Rocker ay suffer or that eague, due to an ND/OR BREACH and representative LESS AND INDE or personal injue the Rainbow Ro at I am 18 years could, in some of understood this irs, next of kin,  or purpose other cact information lanager of the O	that I have or may in the rs Curling League, and my next of kin may suny cause whatsoever II of THE OCCUPIER'S es.  IMNIFY the Rainbow Roury to any third party, nockers Curling League. It is a fagreement prior to sign executors, administrative remaining the stored in a secure so ottawa Curling Club. Reserved.	its represented its represented its represented its represented its represented its resulting from proper proper proper proper proper its resulting its represented its repres	entatives from any esult of my partic NEGLIGENCE, BI ACT, R S 0 1990, ling League and nom my activities mysical condition to any aware that by signs may have a subow Rockers do ague and will not be website that is	Rainbow Ro y and all lia cipation in a REACH OF , C.O 2 ON represental and my pa to participal y signing be against the bes not colle t disclose of	ability for any locativities offered CONTRACT, BRITHE PART OF a cives from any a rticipation in the term of the in this event, and a cive control of the control of the control of the cives of the cive	oss, damage, in ad by the Rainbow Reach OF STAT the Rainbow Reand all liability ne activities offer activity and arriving certain leguers Curling Leand lose your personal information members, reach by the Rainbow Reach Rainbow Reach Rainbow Rainb	ow TUTORY ockers  for any ered by m aware gal rights ggue and onal n to gistered
				Date (yyyy)	/mm/dd)			
Jigilatai C		Complete sec	Complete second page (MANDATORY)					
					_		_	
For Office Use	Only: \$50 De	eposit Paid: cash		cheque	e-t	ransfer		

## The following section is mandatory. Please print clearly. Submitted forms with incomplete information will not be accepted.

<b>Home Address</b>								
Street Address:								
City:								
Province:								
Postal Code:								
Phone Numbers								
Home Phone Number:								
Work Phone Number:								
Cell Phone Number:								
Your \$50 deposit for the 2018-2019 Season								
Will be collected at our closing banquet Sunday, April 15 <sup>th</sup> , 2018								
Can cond an INITEDAC	or							
Can Send an INTERAC	e-Transfer to <u>treasurer@rainbowrockers.ca</u> or							

Whatever method you choose, please ensure to send a signed completed copy of your Registration Form with deposit by May 15<sup>th</sup> 2018 to secure your entry for next season.

Send a cheque payable to "Rainbow Rockers Curling League" along with your completed

registration form to:

221 North River Road Ottawa ON K1L 8B6

c/o Steve H.

\*\* Registrations received after May 15<sup>th</sup> 2018 will be subject to availability \*\*