

2015-2016 Curling Registration Form

Spare Dues

Name: _____

Address: _____

Postal Code: _____ E-Mail Address _____

Home Phone: _____ Work Phone: _____ Cell: _____

Age Category* (please circle) 6-12 13-17 18-54 55+ Male / Female

Name, Postal Code, Gender & Date of Birth are required for Curl BC to receive Government funding

Take your time and ***Please*** Circle all of your choices

League	Times	Available to Spare	Position(s)
Men's	Monday 6:15 & 8:30 pm (Alt.)	Yes No	1 2 3 Skip
Seniors	Tuesday 1:00 pm	Yes No	1 2 3 Skip
Ladies	Tuesday 6:30 & 8:30pm (Alt)	Yes No	1 2 3 Skip
Doubles	Tuesday 8:30 pm	Yes No	1 2 3 Skip
Seniors	Thursday 1:00 pm	Yes No	1 2 3 Skip
Commercial	Thursday 6:15 & 8:30 pm	Yes No	1 2 3 Skip
Mixed	Friday 6:15 pm	Yes No	1 2 3 Skip
Mixed Recreational	Friday 8:30 pm	Yes No	1 2 3 Skip
Legion Open Rec	Sunday 10:30 am	Yes No	1 2 3 Skip

Rate \$160.00 (PGG&CC members eligible for 10% discount)

Price includes GST.

Sub Total \$ _____

Cheque Cash Debit M/C Visa

_____ Exp. ____/____ Total \$ _____

Account # _____ Date: _____ Receipt #: _____