

LEAGUE REGISTRATION 2019/2020

Suite 5, 4512 – 53 Street, Camrose, AB T4V 4E3

Phone (780) 672-4152

Email rccc@cable-lynx.net

OUR MISSION

The Rose City Curling Club will promote youth, family and healthy competition in the spirit of fun and good curling.

FUN WAYS TO VOLUNTEER

(check all that interest you)

- Junior Curling:** Share your curling knowledge and skill with our youth in the Little Rocker or Camrose Academy of Curling programs.
- Bonspiels/Social Events:** Join a committee to organize events while sharing new and creative ideas that will make the club environment a fun experience.
- Recruitment:** Keep our club alive for years to come by promoting club membership in new and innovative ways.
- Skills Development:** If you are a seasoned curler, mentor your fellow curlers in learning more about the sport.
- Bar/Kitchen Duties:** Lend a hand for small amounts of time and socialize with others in the process.
- Website/Social Media:** Have a knack for getting people's attention? Share your talent by letting others know what's happening at the curling club.
- Ice Maintenance:** Team up with our icemaker in grooming the ice to keep our ice surface one of the best.
- Casino:** Help out at the casino fundraiser for a few hours (not scheduled for 2020)
- Board of Directors:** Commit a few hours once a month to attend club meetings and be one of the decision makers for what happens at the club.
- Other:** (please specify)

PERSONAL INFORMATION	Name		Gender		
	Mailing Address			Date of birth	
	City/Town		Postal Code	Primary Phone	
	New to Club <input type="checkbox"/> YES <input type="checkbox"/> NO	Skill Level <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED		Alternate Phone	
	Please check which situation applies best to you: <input type="checkbox"/> I am an individual looking for a team to join <input type="checkbox"/> There are 3 of us who want to curl together; we need 1 more <input type="checkbox"/> There are 2 of us who want to curl together; we need 2 more <input type="checkbox"/> I am part of a complete team of four or more people				
	Please provide a primary email address (mandatory)				
Emergency Contact			Emergency Phone		

Do you consent to having your personal information entered online into curling.io? Yes No

	LEAGUE	Choice	Spare Only	Preferred Position (Skip, Third, Second, or Lead)	Team Name	Fee per person (1 game/week)	
LEAGUE REGISTRATION	Tuesday	Men's & Women's Evening (Full season)	<input type="checkbox"/>	<input type="checkbox"/>		\$300+GST	
	Tues & Thurs	Adults Afternoon Drop-in (2 games/week) (Full Season)	<input type="checkbox"/>				\$300+GST (2 games/wk)
		Adults Afternoon Drop-in (2 games/week) (before Christmas)	<input type="checkbox"/>				\$150+GST (2 games/wk)
		Adults Afternoon Drop-in (2 games/week) (after Christmas)	<input type="checkbox"/>				\$150+GST (2 games/wk)
		Adult Afternoon Drop-in 10 pack card	<input type="checkbox"/>				\$100+GST per card
		Adult Afternoon Drop-in 1 game	<input type="checkbox"/>				\$10+GST per game
Wednesday	Social League (Full Season)	<input type="checkbox"/>	<input type="checkbox"/>			\$285+GST	
	Social League (before Christmas)	<input type="checkbox"/>	<input type="checkbox"/>			\$135+GST	
	Social League (after Christmas)	<input type="checkbox"/>	<input type="checkbox"/>			\$150+GST	
Thursday	Open Team Evening (Full season)	<input type="checkbox"/>	<input type="checkbox"/>			\$300+GST	
Lockers	Locker Rental for full year	<input type="checkbox"/>	LOCKER #			\$ 40+GST	
	Locker Rental for half year	<input type="checkbox"/>	LOCKER #			\$ 20+GST	
Monday Super League – contact the Club Manager for more information (780) 672-4152						\$TBD/team	

WAIVER

Please ensure you have read and signed the Release of Liability, Waiver of Claims and Indemnity Agreement. This form is available online at camrosecurling.com.

OFFICE USE ONLY

Receipt issued _____ Date _____

PAYMENT INFORMATION

Payment Terms

Cash Cheque Debit

Visa MasterCard

Registration Fee(s) \$ _____

Volunteer Fee \$ _____
\$100 deposit

Make cheque payable March 31, 2020. Cheque will be returned after completion of volunteer commitment.

Total Submitted \$ _____