

2023/24 EVENT REGISTRATION FORM

ROSE CITY CURLING CLUB

Suite 5, 4412 – 56th Street

Camrose, Alberta, T4V 5K4

Phone: (780) 672-4152 e-mail: rccc@cable-lynx.net

Please fill in the form entirely

The form can be returned to us via email to rccc@cable-lynx.net

Contact Information

*First name: _____

*Last name: _____

*Email address: _____

*Phone number: _____

Emergency Contact Information

*Emergency contact name: _____

*Emergency contact relation: _____

*Emergency contact phone number _____

Registration Information

*Which event would you like to register for?: _____

*Team:

Player one: _____

Player two: _____

Player three: _____

Player four: _____

Player five: _____

*Preferred payment method: Credit Debit Cheque E-Transfer Cash

Date: _____

Printed name: _____

Signature: _____