CHESTERMERE CURLING CLUB

201 West Chestermere Drive Chestermere, Alberta T1X 1B2 www.chestermerecurling.com



2019 JUNIOR PROGRAM REGISTRATION FORM Sunday Afternoons from JANUARY through MARCH

| Na | ame: | Sex: M/F Age: | Date of Birth_ | / |
|------------------|---|--|--|-------------------------------------|
| | Surname Given | _ | | Day Month Year |
| Ac | ldress | City: | Postal C | ode: |
| Pa | rents Names | | Phone: | |
| Pr | evious CCC Junior YES / NO | Contact Email Ad | ldress: | |
| Na | ame of Parent or Relative available | to supervise on ice | when needed: | |
| | ave you purchased a Current CRC Membership # if you know it | | | ne 30, 2019 |
| <u>PF</u> | ROGRAMS: (Please choose one o | f the categories bel | ow, both are on Su | nday Afternoons) |
| Ea | ach draw time consists of some inst | truction but mostly (| game time. | |
| | #1. Beginners - (2:30 till 4:00 p.m.) ages 7 to 10 or 11 yrs.old with Little or NO curling experience. We start with Lite Rocks and progress to the Big Rocks. | | | |
| | #2. Intermediate or Advanced - (4:00 till 5:30 p.m.) for juniors 10 yrs and older with Some curling experience | | | |
| Ρle | ease list on the line below if you ha | ve a friend or friend | ls you would like to | be on your team. |
| Na | ames: | | | |
| an are bio | arents will be responsible for their c d the other junior curlers any unsal ea. All first year curlers are require cycle helmet is acceptable). For all andatory. | fe or derogatory act ed to wear helmets (| s will result in dism please bring your c | issal from the ice own helmet, a |
| he | ave read the registration form and reby give consent to the involveme quest that my son/daughter be regi | ent of my son/daugh | iter in the curling ac | ctivities and would |

Consenting Parent Signature:______ Date:_____