

BLUE WATER CURLING CLUB REGISTRATION FORM

MEMBER INFORMATION

Name _____ Email _____

Address _____ Phone # _____

City _____ Are you a New Member * Yes No

Postal Code _____ Referred by _____

Smart Serve Certified? Yes No Certificate # _____

* A new member is one who has never been a member of the club or has not been a member of the club in the last 2 years. New
 Adult members receive 20% off their 2018/19 curling dues. New Student Members receive 10% off their 2018/19 curling dues.

CHOOSE YOUR LEAGUE(S)

MEN'S LEAGUE

Thursday 7:00 PM

WOMEN'S LEAGUE

Monday 7:00 PM

PLAYERS CHOICE LEAGUE

Tuesday Evenings

MIXED LEAGUES

Wednesday 7:00 PM Friday 7:00 PM

DAYTIME LEAGUE

Tuesday & Thursday 9:30 AM

Preferred Positions

Skip Vice 2nd Lead N/A

2018/19 FEE STRUCTURE

ADULT CURLERS

Rates include HST		Returning Member		New Member
Single League Rate	<input type="checkbox"/>	\$ 330.00	<input type="checkbox"/>	\$ 264.00
Unlimited Curling	<input type="checkbox"/>	\$ 450.00	<input type="checkbox"/>	\$ 360.00
New Member Debenture			<input type="checkbox"/>	\$ 50.00

All Active Members have Unlimited Sparring

STUDENT CURLERS*

Single League Rate	<input type="checkbox"/>	\$ 230.00
Unlimited Curling	<input type="checkbox"/>	\$ 260.00

* Student curlers are defined as individuals enrolled in secondary or post secondary education under the age of 25

Miscellaneous Fees

Locker Fee \$ 25.00

** Non Active Members that hold a debenture may spare for any league at a cost of \$15.00 per game

PAYMENT DETAILS

Total of League Fees _____

Locker Rental _____

Debenture (if appl.) _____

Total Due _____

Pay In Full Cash Cheque

Admin Use Only

Payment Plan (Add \$25.00 Admin fee to total Due/3)

1st Installment	_____	Immediately
2nd Installment	_____	15-Oct-18
3rd Installment	_____	15-Nov-18

Post Dated Cheques Required

ACKNOWLEDGMENT / UNDERSTANDING

I acknowledge that I have received, reviewed, & understand the following policy's and procedures as implemented by the Blue Water Curling Club & its Board of Directors. By signing below I agree to follow all guidelines, policies, and procedures as directed.

The BWCC Members Handbook, Concussion Guidelines & Return to Play Policy, & Incident Policy & Procedures

Signature of Member _____ Date _____