

2024 - 2025 Youth Membership Registration Form



<http://www.cpcurling.ca>

Mail registration form to:

The Carleton Place Curling Club
120 Patterson Cr.

Carleton Place, ON, K7C 4P3

Email:

Megan016@hotmail.com

Phone: (613) 257-1944

Fax: (613) 257-1101

Registration Dates

No in-person registration this season. Completed Registration Applications with payment may be either dropped off at CPCC, mailed to CPCC or via email to membership@cpcurling.ca

WHERE DID YOU HEAR ABOUT US?

Registration

Family Name:		Given Name:	
School:		Birth Date:	
Email:			
Address:			
Town:		Province:	
Phone #:		Postal Code:	
List any medical conditions the curler has which the instructors should be aware of			

Parent / Guardian Contact Information

Family Name:		Given Name:	
Address:			
Town:		Province:	
Telephone:		Email:	

Children under 12 with a parent or guardian that is a full member (curls one game or more per week for the whole year) curl for

Alternate Parent / Guardian Contact Information

Family Name:		Given Name:	
Telephone:		Email:	

Membership rates (circle options)

		AGES		Session 1 (Oct - Dec)	Session 2 (Jan - Apr)	Circle what time
	Bantam	U13	under 13	\$35.40 + tax (\$40)	\$35.40 + tax (\$40)	Wednesday at 4 pm - 6 pm
		U15	under 15	\$44.25 + tax (\$50)	\$44.25 + tax (\$50)	Wednesday at 4 pm - 6 pm
	Junior	U21	under 21	\$44.25 + tax (\$50)	\$44.25 + tax (\$50)	Wednesday at 4 pm - 6 pm

If one parent is a member and your child is between the ages of 13-21 years old you must pay \$20.00 for OCA fees

Waiver of Liability

Membership Fees

I assume all risks incidental to participation in Youth Curling and I absolve the organizers and participants from any claim arising out of injury to my daughter/son, except to the extent and in the amount covered by accident or liability insurance.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Membership Fee(s):</td> <td style="width: 20%;"></td> </tr> <tr> <td>13% hst</td> <td></td> </tr> <tr> <td style="text-align: right;">TOTAL:</td> <td></td> </tr> </table>	Membership Fee(s):		13% hst		TOTAL:	
Membership Fee(s):							
13% hst							
TOTAL:							
Signature of Parent/Guardian:							
Date:							
Payment Received:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No				
Yes	No						
Parent Member:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No				
Yes	No						