

INDIVIDUAL Registration Form 2020-21

If you have a FULL TEAM, please use our TEAM FORM



Name: _____

Address: _____

City, Prov, Postal Code: _____

Phone 1: _____ Phone 2: _____

Email: _____

	League (e.g. Mon Open)	Team Name (skip)	Your position (2nd, 3rd, lead, 5th)
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

MEMBER TYPE (please check one):

Regular Senior Student Junior

SHAREHOLDER?

See fee chart for all current pricing and transfer appropriate totals below:

Life Member	n/c
S/H in assoc. league	n/c (list league above)
Social member	\$33 (incl GST)

Extra player	\$
LEAGUE FEES	\$

TOTAL OWING:

mail to:
info@calgarycurlingclub.com

VISA or MC:

expiry:

CCV:

FOR OFFICE USE ONLY:

Date received: _____

Receipt #: _____