

**ARC YOUTH CURLING REGISTRATION AND WAIVER FORM
2019 – 2020 SEASON**

Curler's First name: _____ Last name: _____

Address: _____ Postal code: _____

Parent's email address: _____

Year of birth: _____ Gender: _____

Number of years curled: _____ Interested in Sunday League (Y/N) _____

Any medical conditions we should be aware of? _____

Parent/Guardian name: _____

Phone #: _____ home _____ cell

Alternate Emergency Contact: _____

Phone #: _____ home _____ cell

WAIVER:

I/We, the parent(s) or Guardian(s) of the above-named registrant, hereby give my/our approval of his/her participation in any and all of the activities of the "ARC YOUTH CURLING CLUB", during the 2019 - 2020 season. I/We assume all risks and hazards incidental to the conduct of the activities. I/We do further hereby release, absolve, indemnify, and hold harmless the "ARC YOUTH CURLING CLUB", its Directors, Coaches, Volunteers and Supervisors, any or all of them.

Signature of Parent/Guardian: _____ Date: _____

VOLUNTEER ACTIVITIES:

Please indicate below if you are able to help with any of these duties:

On ice duties (voluntary roles whenever you are able):

- Willing to be a coach: Coach/instructor: NCCP Coach Certification Level _____
- Interested in becoming a certified curling coach
- Interested in assisting the coaches on the ice

Off ice duties:

- First aid (Trained in First Aid and available to assist if required)
 - Funspiels (Assisting with set-up and clean-up)
 - Cleaning brooms before the session (on rotation)
 - Taking attendance each week (on rotation)
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ARC Youth Curling Program Fee - \$155

Please make cheque payable to: ARC Youth Curling

Deliver completed form and payment to:

**ARC Youth Curling
Acadia Recreation Complex
240 – 90th Avenue SE, Calgary, AB T2J-6P6**