



# St Vital Junior Curling Club

## 2020/21 Junior Super League Team Entry

Complete the form to register a team for the season. If you would like to register as individual please use the individual registration form. Please ensure you provide a valid email address and it is the primary method of communication for league information, updates and schedules.

Skip Name: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Parent: (Name) \_\_\_\_\_ (Phone/Email) \_\_\_\_\_

Third Name: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Parent: (Name) \_\_\_\_\_ (Phone/Email) \_\_\_\_\_

Second Name: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Parent: (Name) \_\_\_\_\_ (Phone/Email) \_\_\_\_\_

Lead Name: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Parent: (Name) \_\_\_\_\_ (Phone/Email) \_\_\_\_\_

Fifth Name: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Parent: (Name) \_\_\_\_\_ (Phone/Email) \_\_\_\_\_

Fees are \$780 per team. Fifths are an additional \$40.

Individual fees (without a team) are \$195.

Make cheques payable to the

**St. Vital Junior Curling Club**