

Chedabucto Curling Club

6 Reddy's Hill Road, Boylston, NS B0H 1G0
(Phone: 902-533-3328) www.chedabuctocc.ca

Little Rockers / Junior Registration / Emergency Response Information 2022 – 2023

(Juniors' white binder with confidential emergency response information / registration sheets stored in kitchen on the fridge)

Name: _____ Phone number: _____

Residential address: _____

Postal mail address if different from residence _____

Please circle appropriate division for this child: Little Rocker Day Junior Night Junior

Birthdate: _____ Health Card MSI # _____
Day / Month / Year

Parent's/Guardian's name _____ Email address: _____

Contact in case of emergency: Name _____ Phone #: _____

Doctor to contact: Name: _____ Phone #: _____

Special medical information that you volunteer to indicate: _____

Little Rockers / Juniors 2022-23 Registration Fee: \$60 (tax inclusive)

Make cheque payable to CAS.

_____ Cheque _____ Cash _____ E-transfer to treasurer: **chedabuctocc.cas@outlook.com**

Parents/Guardians: If parent(s)/guardian(s) are willing to assist, please circle the committee choice(s).

Kitchen Social Juniors (Little Rockers and/or Regular) Housekeeping
Grounds Maintenance Advertisement (Sponsor Signs) Ways and Means

I give permission for my child/ward to become a Little Rocker / Junior Member of the Chedabucto Curling Club Community Activity Society (CAS), also referred to as the Chedabucto Curling Club. I give consent for my address, email and/or my phone number to be used when necessary regarding schedules, bonspiels and other matters relating to CAS' operations. Photographs of curling-related topics with my child's / ward's photograph may be published when they are associated with CAS.

Parent's / Guardian's Signature

Date