



The Winter Club of St. Catharines

175 KENT ST, PORT COLBORNE L3K 2Z7, Phone (905) 641-5777 www.skatewc.ca teamwinterclub@hotmail.com

Adult Membership Form: Fall/Winter 2013 – 2014 Sanctioned by Skate Canada

Registration: Wed Aug 21, 2013; Meridian Room, Seymour-Hannah: 6:00-8:00 PM

Fall/Winter: Wed: Sept 11, 2013 – Mar 5, 2014

7:25 – 8:45 PM

: (no ice Dec 25, 2013; Jan 1, 2014)

\$600.00

Skate Canada Fee (to be added to registration fee for Home Club registration)

\$35.00

All Sessions held at:
Seymour-Hannah Sports and Entertainment Complex
240 St. Paul Street West
St. Catharines, ON

PLEASE COMPLETE THE FOLLOWING:

SKATER NAME _____

ADDRESS _____

CONTACT #'s: H _____ C _____ EMAIL _____

SKATE CANADA # _____ HEALTH CARD # _____

HOME CLUB _____ PROFESSIONAL _____

HIGHEST COMPLETE TEST PASSED _____

FORM OF PAYMENT: CHEQUE _____ CASH _____

CONSENT

I, _____ consent to (skater's name) _____ participating in the activities of The Winter Club of St. Catharines and hereby release and forever discharge The Winter Club of St. Catharines and their agents, being all Coaches, Directors, Officers, Volunteers, Members, Staff successors and/or assignees of and from all claims, damages, actions or causes of action arising by reason of participation of (skater's name) _____ in skating or other club activities and from all claims or demands whatsoever in law or in equity which I, my heir, executors, administrators, or assignees can, shall or may have because of such participation.

Signature of Parent or Applicant (if over 18 years of age)

Date

Registration may be paid:

One cheque for the full amount dated Sept. 1, 2013

Six cheques (total fee divided by six) payable Sept 1, Oct 1, Nov 1, Dec 1; 2013, Jan 1, Feb 1; 2014

Make all cheques payable to: **Winter Club of St. Catharines**

175 KENT ST, PORT COLBORNE L3K 2Z7