

# FLC Seniors Curling Club

## Registration Form

All Curlers in our FLC Seniors Mixed Curling League must have a current FLC Seniors Club Membership and hereby agree to pay all annual Curling Fees as set from time to time.

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Mailing Address \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Home Phone # ( ) - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone # ( ) - \_\_\_\_\_ - \_\_\_\_\_

Male \_\_\_ Female \_\_\_ FLC Seniors Club Membership # \_\_\_\_\_

Age (optional) \_\_\_\_\_

### **Regular Curler** (Please mark preference with an **X** )

**Wednesday:** Lead \_\_\_ Second \_\_\_ Third \_\_\_ Skip \_\_\_

Full Season \_\_\_ **OR** 1<sup>st</sup> Half only \_\_\_ **OR** 2<sup>nd</sup> Half only \_\_\_

**Friday:** Lead \_\_\_ Second \_\_\_ Third \_\_\_ Skip \_\_\_

Full Season \_\_\_ **OR** 1<sup>st</sup> Half only \_\_\_ **OR** 2<sup>nd</sup> Half only \_\_\_

**Total Curling Fees Due as per the above request \$ \_\_\_\_\_ , Paid by - Cash \_\_\_ Cheque \_\_\_**

**Spares** **Wednesday** \_\_\_\_\_ **Friday** \_\_\_\_\_

Lead \_\_\_ Second \_\_\_ Third \_\_\_ Skip \_\_\_

My preference is to Spare: Full Season \_\_\_ **OR** 1<sup>st</sup> Half only \_\_\_ **OR** 2<sup>nd</sup> Half only \_\_\_

**Note:** The above information is for league use only and will not be disclosed without authorization.

Your signature indicates your agreement to the above and allows us to publish your name on our team and curling draw lists, they will be posted on our website.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Send completed registration form to [curling@flcseniors.ca](mailto:curling@flcseniors.ca)**

View both the teams and draws on our website at [www.flcseniors.ca](http://www.flcseniors.ca) and click on Curling.

If you have any questions, please contact any member of the Curling Executive.