

OAKVILLE SPEED SKATING CLUB APPLICATION – 2019-2020 SEASON

Family Surname: _____

Skater #1 Name: _____ Date of Birth (dd/mm/yy): _____

Male/Female (M/F): _____ Allergies/Medical Condition/Impairments: _____

Program: _____ Skate Rental: Both Boots and Blades: _____; Boots Only: _____; Blades Only: _____

Skater #2 Name: _____ Date of Birth (dd/mm/yy): _____

Male/Female (M/F): _____ Allergies/Medical Condition/Impairments: _____

Program: _____ Skate Rental: Both Boots and Blades: _____; Boots Only: _____; Blades Only: _____

Skater #3 Name: _____ Date of Birth (dd/mm/yy): _____

Male/Female (M/F): _____ Allergies/Medical Condition/Impairments: _____

Program: _____ Skate Rental: Both Boots and Blades: _____; Boots Only: _____; Blades Only: _____

Address: _____ City: _____

Postal Code: _____ Home Telephone No.: _____

Mobile No. 1: _____ Name of Mobile User: _____

Mobile No. 2: _____ Name of Mobile User: _____

Email Address: _____

Physician: _____ Phone No. _____

Does your Family have Public or Private Health Coverage: _____

In Emergency notify (if not Parent/Guardian): Name, Relation, and Phone No: _____

We provide our express consent to the Oakville Speed Skating Club ("Club") to disclose our personal information to any Speed Skating Association with purposes of joining those Associations. We also provide express consent to the Club to put photographs, descriptions and competitive related achievements on our Club's website, or in the local Oakville newspapers.

Adult Skater or Parent/Guardian's Signature (if Skater is under 18 years of age)

Date: _____ **Signature:** _____

Attention: Parents/Guardians/Adult Skaters are strongly encouraged and welcome to become involved and assist you/r skater(s) and the Club in one or more of the following ways (please check off):

Fundraising _____ Setting out and storing mats _____ Repairing mats _____ Skate sharpening _____ Filling water buckets and Ice resurfacing coordination _____ Practice timing _____ General Assistance _____ Club Meet and/or Club Mini Meet Assistance _____