

**LONDON SPEED SKATING CLUB
2011/2012**

TRY BY JOIN REGISTRATION FORM

CLUB INFORMATION				
PERSONAL INFORMATION (provide details for each skater)				
			Sex	
Name	Shoe/Skate size	Date of Birth (dd/mon/yy)	M	F
ADDRESS		TELEPHONE #		
		EMAIL ADDRESS		
PARENT'S NAME(S) (IF SKATER UNDER 18)				
PAYMENT RECEIVED: \$ 20.00 Cash <input type="checkbox"/> Cheque <input type="checkbox"/>				
WAIVER/AGREEMENT				
<p>I hereby authorize emergency medical or surgical treatment for myself and/or my daughter/son/ward if such treatment is required while I or my daughter/son/ward is participating in the London Speed Skating Club, Ontario Speed Skating Association (OSSA) or Speed Skating Canada (SSC) activities. I hereby, for myself, my heirs, executors and assigns, waive and release any damages I may have against the London Speed Skating Club and the City of London or their agents for any damages.</p>				
SIGNATURE:			DATE:	