



SASKATCHEWAN
ATHLETICS

2018 SPRING CAMP REGISTRATION FORM

NAME: _____

BIRTHDATE: _____
(DD/MM/YYYY)

ADDRESS: _____

CITY: _____

POSTAL CODE: _____

PHONE: _____

PARENT'S EMAIL: _____

GENDER: _____

HEALTH #: _____
(9 digits)

EMERGENCY CONTACT: _____

EMERGENCY CONTACT #: _____

GRADE: _____

MEDICAL CONCERNS (allergies, special diet, medications, medical conditions, etc.):

EVENT AREA PREFERENCE (select two): HURDLES SPRINTS JUMPS DISTANCE THROWS

PAYMENT OPTIONS:

- \$100 2018 Sask Excellence Members
- \$135 Current members of Saskatchewan Athletics
- \$205 Athletes born 03/04 who are not Sask Athletics members
- \$220 Athletes born 00/01/02 who are not Sask Athletics members

Method of Payment: Cheque Money Order Credit Card Cash

Visa/Mastercard: _____ **Expiry Date:** _____

Receipt: YES NO

Photo and Video Release: In signing below, I agree that Saskatchewan Athletics may use photographs and video of me with or without my name for purposes such as publicity, illustration, advertising, and web content.

Athlete Signature

Date

Parent/Guardian Signature

Date

Please make cheques payable to *Saskatchewan Athletics* and send to:
Saskatchewan Athletics | 2020 College Drive | Saskatoon, SK | S7N 2W4
Phone: (306) 664-6744 | Fax: (306) 664-6761 | Email: programs@saskathletics.ca



| Office Use Only | |
|-------------------|---|
| Payment Received: | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Type: | <input type="checkbox"/> CA <input type="checkbox"/> CH <input type="checkbox"/> MO <input type="checkbox"/> CR |
| Cheque #: | _____ |
| Date Received: | _____ |