



# VANCOUVER CURLING CLUB

## 2011- 2012 Season Registration Form

In order to gather and maintain up-to-date information from its members, the Vancouver Curling Club requires that you please complete this registration form.

This information will be put into a database that is maintained solely by the VCC and no personal identifiable information from the Membership Database shall be shared with or sold to any outside individuals or groups – it shall be for the exclusive use of the VCC.

Please be sure to complete all of the fields below.

**First Name:**

**E-mail:**

**Last Name:**

**Phone (main):**

**Gender:**

**Phone (alternate):**

**Birthdate (day-mo-yr):**

**City:**

**Postal Code:**

**Do you curl at another club?**

**If yes, please list club(s):**

**# of Years Curling:**

**What is your Primary League?**

This will indicate which league you'll be paying your membership dues to.

**Primary League Team Name:**

**Additional League 1:**

**Additional League 1 Team Name:**

**Additional League 2:**

**Additional League 2 Team Name:**

**Are you interested in volunteering this year at the Club?**

**If yes, please select your area(s) of interest:**

Coaching

Communications

Events

Fundraising

Administrative Support

Ice

Other:

*Please turn over to complete the waiver and release.*



# VANCOUVER CURLING CLUB

## 2011- 2012 Participant Waiver and Release

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**Please read the waiver and release regarding liability located below. By initialing or signing, you confirm you have read and understood the waiver and will not hold the VCC responsible for any injury, loss or damages.**

### 2011-2012 SEASON

In consideration of the acceptance of my participation at this club and in this league, I, for myself, my heirs, executors, administrations and assigns, waive any claims to which I may be entitled for injury or damage and release the Vancouver Curling Club Association, its directors and employees, and all organizers, sponsors, volunteers, representatives, their agents and employees and any other person or organization assisting in this event (the "Releasees") from any claims for damages, loss or injury suffered by me or my property as a result of my participation in, observation of or traveling to or from, this event, or in any other way related to the event, whether caused by negligence of the Releasees or otherwise.

I further acknowledge and understand that the sport of curling has some inherent risks. The combination of heavy moving stones, sudden movement, physical exertion and a slippery ice surface may create conditions where the potential for physical injury to participants is very high. I state that I am in proper physical condition to participate in this event and I am aware that participation could result in injury. I also give my permission for the free use of my name and picture in broadcast, telecast or written account of this event.

*Note: If you have any questions about any aspect of this waiver and release, please contact a VCC representative before accepting.*

By typing in your initials below and/or signing your name below to accept this waiver & release, you confirm you have read and understood this waiver.

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Signature

Initials

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Name of parent signing above for young members who are under 19 years old.