



Hamilton Victoria Club

Member Registration 2016-2017

Returning Member New Member How did you hear about our club? _____ # of yrs curled _____

Last Name: _____ First Name: _____ Date of Birth(m/d/y): _____

Address: _____ City: _____

Postal Code: _____ E-mail: _____ Occupation: _____

Telephone: _____ Alternate Telephone: _____

Membership Fee (Mark one selection below)	League Choice(s)	Join
<p>\$88.50 Learn to Curl League (6 Weeks)</p> <p>This league will run on Tuesday nights starting at either 6:45pm or 9:00pm (alternating weeks), beginning October 25th (6:45pm) and ending on November 29th.</p> <p>Participants in this league can have the \$88.50 credited towards a full membership at the end of the six week session.</p>	Learn to Curl League (Tues nights)	<input type="checkbox"/>
	Place an X beside the league(s) you are joining.	

A.	<p style="text-align: right;">Membership Fee</p> (Enter amount from above; include amount for each additional league(s) where applicable)	\$88.50
B.	<p style="text-align: center;">ADD \$50 Refundable Volunteer Fee</p> (Refundable after completing 8 hours of volunteering and completing volunteer form.) (New Member Intro, Little Rocks, U18, U21, and Social members are excluded; Please cross this amount out for these membership types only.)	N/A
C.	<p>DEDUCT \$150 Associate League Discount (Please specify associate league _____)</p>	N/A
D.	Fee Subtotal (A + B - C)	\$88.50
E.	ADD HST (13% X D Subtotal)	11.50
F.	<p style="text-align: center;">ADD Mandatory Reserve Fund Charge \$50</p> (New Member Intro, Little Rocks, U18, U21 and Social members are excluded. Please cross this amount out for these membership types only.) If this is your second curling season paying the Reserve Fund Charge. Please check the following box	N/A
G.	Total Fees Owning (D + E + F)	\$100.00

Assumption of risk/release of liability agreement.

I hereby agree to the rules of membership and the policies of the Victoria Curling Club. I also understand that there is a risk of injury when participating in any physical activity including curling. I hereby release anyone involved with the Hamilton Victoria Curling Club including its staff, volunteers and Board of Directors from all liability, claims and causes of action arising from injury and / or damage or theft of my personal property incurred while in attendance at the Victoria Curling Club. I also acknowledge that the Curling Club annually publishes a roster of members and contact information for the exclusive use of members, and understand that my personal information may be used for this purpose.

Date: _____ Signature: _____

REGISTRATION AND PAYMENT IN FULL IS REQUIRED PRIOR TO JOINING ANY LEAGUE

For Internal Use: Cash Cheque Credit Card Date Received: