



# Curling: Individual Registration Form

## Information

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

City, Prov., Postal Code \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Name of Spouse (each spouse needs to complete a registration form) \_\_\_\_\_

## Leagues

<input type="checkbox"/> Senior Afternoon Flight Monday	<input type="checkbox"/> Individual Team:	<input type="checkbox"/> Team	<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Senior Flight Wednesday	<input type="checkbox"/> Individual Team:	<input type="checkbox"/> Team	<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Ladies Evening Monday			<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Ladies Afternoon Tuesday			<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Rookie League Tuesday Evening			<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Coffee Club Monday, Tuesday, & Thursday Mornings			<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Gord McCrady Flight Wednesday Afternoon	<input type="checkbox"/> Individual Team:	<input type="checkbox"/> Team	<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Charlie Brady Flight Thursday Evening	<input type="checkbox"/> Individual Team:	<input type="checkbox"/> Team	<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Ken Allen Sunday Social Sunday Morning	<input type="checkbox"/> Individual Team:	<input type="checkbox"/> Team	<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> TGIF Friday Evening			<input type="checkbox"/> Full Time	<input type="checkbox"/> Spare
<input type="checkbox"/> Little Rocks				
<input type="checkbox"/> Bantam				