



Registration Form 2008



Name: _____ Parents/Gaurdian: _____

Address: _____ City: _____ Postal Code: _____

Home #: _____ Work #: _____ Cell# _____

Email: _____

Male/Female: _____ Birthdate: _____

* Junior Participants must be 14 years of age as of December 31, 2007. Exceptions may be made for highly skilled juniors on a case by case basis.

Emergency Contact: _____ Relation: _____

____ Jr. Individual Camp August 5-7, 2008 (\$475) ____ Jr. Team Camp August 8-10, 2008 (\$475)

Team Name: _____

Coach Name: _____

Jacket/Shirt Size: Men's _____ Women's _____
 Small _____ Medium _____ Large _____ X-Large _____ XX-Large _____

Years Curling: _____ Position: _____ Coach: _____

Please describe your curling experience including all trips to zones, provincials, nationals, and indicate your future curling goals. (Attach more pages if necessary).

Send registrations with full payment (cheque (payable to University of Alberta), Visa, or MC) to:

Saville Sports Centre
6501 115 St
Edmonton, AB
T6G 2E1

Visa/MC#: _____ Exp: _____
Signature: _____

Registration fees include all meals along with a social evening. Accommodations will be available for a discounted rate through the host hotel.

Terms and conditions: The organizers reserve the right to substitute instructors based on availability. Kevin Martin's Summer Curling Academy, Saville Sports Centre, their staff, and contractors are not responsible for injuries at the Kevin Martin's Summer Curling Academy. There will be no refunds. Registrations are fully transferable in case of illness or injury.

*First priority will be given to teams registering with four players plus a coach. Teams with partial rosters may be accepted, but only hafter those will full rosters are accommodated.