



PORT COQUITLAM SPEED SKATING
REGISTRATION 2018-2019



Name _____ (Last) PLEASE PRINT BLOCK LETTERS (First) Male Female

Birth date ____/____/____ Age as of Jun 30/2018 ____ Age Class _____ (Registrar)
Day Month Year

Status: Check box Canadian Landed Immigrant Permanent Resident International registered skater

Contact information: Father _____ Mother _____
(Both parents/guardians are registered as Lightning Speed Skating associate members)

Address _____

E-mail _____

Phone Number _____ (home) _____ (Cell)

I give permission for the contact information to be circulated in a club phone list: YES NO

Emergency Contact _____ Phone number _____

Fundraising: In order to qualify for our Provincial funding that offsets a good portion of our costs,
We must perform fund-raising activities. It is expected therefore that all Members participate.

Activities: I hereby give my consent for the above-mentioned applicant to participate in any and all activities of the Lightning Speed Skating Club.
I assume all risks, including going to and from club functions and hereby release the Club, it's Directors and all members from any claims or any
blame arising out of any loss of injury that may occur to the above mentioned applicant.

Competitions/Camps: In consideration of you accepting this application, I hereby, for myself, my heirs, executors, administrators and assigns,
waive and release any and all rights and claims for damages I may have against Speed Skating Canada, it's member clubs and the British
Columbia Speed Skating Associations, their agents, officers or members and the Host Club for any injuries suffered by me at such event(s) to be
held at whatever venue site during the 2018-2019 season.

Privacy Act : The provision of the information requested by the POCO Lightning Speed Skating CLUB is subject to the policies contained in
the Club's Privacy Policy. I acknowledge that I have been given a copy of the Club's Privacy Policy and I fully understand the implications of the
policy.

Code of Conduct : I acknowledge that I have been given a copy of the code of conduct for POCO Lightning Speed Skating and agree to the
terms, expectations and consequences.

REGISTRATION FEES: (Please make cheques payable to: Port Coquitlam Speed Skating Club)

Table with 5 columns: Program, Fees (Ice time), Fees (BCSSA/SSC registration and Insurance), Total Cost, Ice Times. Rows include High Performance, Regular (3 day/wk), Regular (2 day/wk), Learn to Speed Skating, Skate Rental, Family/Volunteer Registration, and Total Paid.

Note: * Skate rental cost included in registration fee for Learn to Speed Skating

**Thursday's subject to coaches' approval

PLUS: Fundraising contribution – post-dated cheque (March 1, 2019) for \$150.00 required upon registration
Skate damage deposit *\$200.00 (if renting) Separate cheque required on Skate Pickup Dates – TBA

Signature of Parent or Guardian if under 19 _____ Signature of Participant _____

Date: _____

Club representative _____

Please fill out second page. If someone other than a parent will be at the rink assisting please provide that persons
information as well.



PORT COQUITLAM SPEED SKATING CLUB

PARENT /ASSOCIATE / VOLUNTEER REGISTRATION 2018-2019 SEASON

First Name	Last Name
Street Address	Home Telephone
City	Cell Phone
Postal Code	Email (for POCO use)
Date of Birth (dd/mm/yyyy)	

PARENT /ASSOCIATE / VOLUNTEER REGISTRATION 2018-2019 SEASON

First Name	Last Name
Street Address	Home Telephone
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Some information may be shared with Speed Skating Canada and British Columbia Speed Skating Association as needed in the administration on the sport.

All information contained here-in is considered confidential

