



# Ontario School Curling PROVINCIAL CHAMPIONSHIPS

## REGISTRATION FORM

School:

Zone:

Address:

City:

Postal Code:

Schoolboy Competition:

Schoolgirl Competition:

Position	Name	Date of Birth	Age on Sept. 1
Skip			
Vice			
Second			
Lead			
Alternate			

We, the undersigned, acknowledge that we have read and agree to abide by the Competition Rules outlined on the Ontario School Curling website.

School Principal:

Coach:

Signature:

Signature:

Date:

Date:

School Phone #:

Coach Phone #:

FAX #:

Coach Email:

Alternate Coach: (if applicable)

Entry Fee of \$150 is enclosed:

Entry Fee will be forwarded at a later date:

### NOTES:

- ▶ *You may enter more than one team; use one registration form per team.*
- ▶ *Convenor information may be found under the Zone Locations at [www.oscurling.com](http://www.oscurling.com)*
- ▶ *Email registration form to the convenor before the Zone playdown deadline date.*
- ▶ *If electronic signature capability is available, please use. If it is not available, please mail or bring a copy of the signed form to the Zone playdown.*
- ▶ *Please make cheque payable to the convenor looking after the Zone playdown.*