



# REGISTRATION FORM

Year \* \_\_\_\_\_

Zone \* \_\_\_\_\_

Sport \* \_\_\_\_\_

**Please print**

Preferred First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_  
(This format is how your name will appear on your badge, schedules, draws, results, etc.)

Membership Status\* Participant  Non-Participant  Member

Gender: \* Male  Female  Birthdate: \* \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Year Month Day

Home Phone\* \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact Name\* \_\_\_\_\_ Phone No. 1\* \_\_\_\_\_  
(for use during the Games)

Emergency Contact Phone No. 2 \_\_\_\_\_ (for use during the Games)

Home Address\* \_\_\_\_\_ City\* \_\_\_\_\_

Postal Code\* \_\_\_\_\_ Province – BC Country – Canada

Waiver signed \* Yes  No  Transportation Required\* Yes  Not Required

Is this person a **new** member? \* Yes  No

**OPTIONAL:** Are you of Aboriginal ancestry including First Nations, Metis, Inuit? Yes  No

I, \_\_\_\_\_, signed and dated on \_\_\_\_\_ confirm that I agree that all of my above information is true in this registration application.

\*these items are mandatory

Please make cheques payable to BC Seniors Games Society Zone # \_\_\_\_\_

## FOR ZONE USE ONLY:

Registrars/Coordinators may use this section as part of their record keeping:

BCSGS Membership ID # \_\_\_\_\_ Membership Card issued Yes  No

Date Online Registration Completed \_\_\_\_\_

Date OnLine Registration Checked \_\_\_\_\_

Membership Fee (\$20.00 Paid \_\_\_\_\_

Participant Fee (\$50.00) Paid \_\_\_\_\_

Non Participant Fee (\$35.00) Paid \_\_\_\_\_

Sport Fee Paid \_\_\_\_\_