



# ESSA 2020-2021 Registration Form

OFFICE USE ONLY	
Processor	
Paid	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque
Cheque #	

## Participant Information

First Name		Last Name	
Birthdate			
Street Address			
City		Postal Code	
Phone		Gender	F / M
Email			
Program	<b>Adult 1 (Beginner / Coached)</b> <input type="checkbox"/> \$275	<b>Adult 2 (Masters / Uncoached)</b> <input type="checkbox"/> \$275	

## Emergency Contact Information (If a guardian cannot be reached)

Full Name			
Relationship			
Phone		Email (optional)	

Total Fees \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_