

Parry Sound Curling Club

Junior Curling Registration Form

Indoor shoes or curling shoes must be worn on the ice.

Grades 4, 5 and 6 must wear helmets.

Send registration payment to psjrcurling@hotmail.com

Name of Junior Curler: _____

School: _____

Age: _____

After Curling Practise Routine: (who is responsible for picking them up, etc.)

Contact Information:

Parent/ Guardian Name: _____

Home Phone #: _____

Work Phone #: _____

Cell Phone#: _____

Email Address: _____

Parent/ Guardian Name: _____

Home Phone #: _____

Work Phone #: _____

Cell Phone #: _____

Email Address: _____

Please let us know if you can volunteer. There are several jobs you can help us with that don't involve going on the ice.