CONTACT US

Arrange to give it a TRY FOR FREE before deciding to join the club.



kamloopslongblades.ca

Special Event Skater 2015-2016

The Kamloops Long Blades Speed Skating Club welcomes you and hopes you will enjoy this opportunity to experience speed skating today. Have fun!

Please print all information clearly and completely.		
Family Name		
Parent Names		
Address	Postal Code	
Home Phone ()		
E-mail	_	
Skater Name(s)	Birth Date	Age
1)	Month Day Year	
2)	Month Day Year	
3)	Month Day Year	
SAFETY EQUIPMENT IS REQUIRED. ALL SKATERS MUS Please bring your own hard shell helmet without slits (ski/sno		
WAIVER: By signing this form, I hereby, for myself, my heirs, execute and all rights and claims for damages I may have against the Kamloops officers and members and the City of Kamloops, for any and all injurie season.	s Long Blades Speed Skat	ting Association, its agents,
The information collected here is under the authority of the Freedom Personal Information Protection Act (PIPA). It is required to register y Financial information will be used to process payment. Names/Pic communications (newsletters/website). Medical information will only by about the collection of or use of this information, contact the Kamloops Lo	you in the lessons and ma tures may be published used in a medical emerge	ay be used to contact you. on boards, media or club ency. If you have questions
X	Date	
SIGNATURE (Parent or Legal Guardian, if skater is under 19) tear on dotted line and keep bottom portion		
	tear on dolled line and	veeh norrout houriou = = = = =

"I TRIED SPEED SKATING AND I LOVE IT!"

CONTACT US – we have Programs for all ages & abilities



kamloopslongblades.ca

Registrar: Darcy Lawhead Email: KLBmembership@shaw.ca