

# Sarnia Junior Squash Organization Registration Form

Please check the box for the session you wish to register for. The cost for a League Session is \$150.00 which includes weekday lessons and Sunday games. The cost for Introductory Session is \$60 (weekly lessons for 6 weeks). The sessions will be held at both the Sarnia Riding Club and Huron Oaks Squash Club. Please indicate your preferred choice of days below.

Please complete the registration form (2 pages) and mail it along with your cheque to:

Sarnia Junior Squash Organization  
c/o Chris Drope  
1277 Daley Ave.  
Sarnia, Ont.  
N7S 5X3

Name: \_\_\_\_\_

Date of Birth: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

Street Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Main Email Address: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Parents' Work Telephone: \_\_\_\_\_

League Session #1: Tuesdays, 4:20 – 5:40 pm and Sundays, 3:00 – 5:00 pm,  
from the week of Sept. 20/11 – Mar. 8/12 (**Club Membership Required**)

League Session #2: Thursdays, 4:20 – 5:40 pm and Sundays, 3:00 – 5:00 pm,  
from the week of Sept. 20/11 – Mar. 8/12 (**Club Membership Required**)

Introductory Session #1 (Wednesdays, 4:30 – 5:30 pm from Oct. 26/11 – Nov 30/11)

**Medical and Emergency Information**

Person to contact in case of an emergency, if parent(s) are not available:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: (    )       - \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Phone: (    )       - \_\_\_\_\_

Health Card #: \_\_\_\_\_

MEDICAL INFORMATION: Please provide a brief summary of your child's medical history, including but not limited to: Allergies, Diseases, Heart Conditions, Asthma, Corrective Lenses, Diabetes, Medic-Alerts, Medications, Present Injuries, Epilepsy and any other relevant information.

\_\_\_\_\_

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Date: \_\_\_\_\_ Signature of Parent/Guardian: \_\_\_\_\_