



Calgary Legacy  
Community  
Association

## Program Registration

### **Registrant Information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ Gender: M \_\_\_\_\_ F \_\_\_\_\_

Email address: \_\_\_\_\_

### **Parent/Guardian Information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ Gender: M \_\_\_\_\_ F \_\_\_\_\_

Email address: \_\_\_\_\_

Relationship to registrant: \_\_\_\_\_

### **Parent/Guardian Consent Form**

I, the undersigned, give permission for my child, \_\_\_\_\_, a minor, to participate in the Calgary Legacy Community Association recreational program, (Community Axe Throwing League). I understand the nature of sports activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I agree to relieve the Calgary Legacy Community Association, its officer agents from any liability in connection with any injury to my child in connection with this league. I will ensure my child is accompanied to all events and will maintain supervision of my child at all times and understand and relieve the Calgary Legacy Community Association of any responsibility of my child. Should my child be left unaccompanied, it is understood that I am still responsible for the safety and well being of my child and not the Calgary Legacy Community Association or any officers/agents acting on behalf of the Calgary Legacy Community Association.

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

### **Photo/Video Release Form**

I hereby give permission to the Calgary Legacy Community Association to photograph and/or videotape my child. The sole purpose of these photos and/or videos is for publication, advertisement and exhibition services of the Calgary Legacy Community Association

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

### **Refund Policy**

Please note the Calgary Legacy Community Association will not refund any program registrations once the program commences. Requests made prior to 2 weeks of programming commencing will receive full refund, less 15% administration fee. Any requests made within 2 weeks of program commencement will receive 50% of registration fee.

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