

ST. ALBERT CURLING CLUB 2010-2011 LEAGUE APPLICATION FORM

MEN	MIXED	LADIES	BEGINNER OPEN
<input type="checkbox"/> Monday 6:30 & 8:45 p.m.**	<input type="checkbox"/> Thursday 6:30 & 8:45 p.m.**	<input type="checkbox"/> Wed 6:30 & 8:45 p.m.**	<input type="checkbox"/> Wed 6:30 & 8:45 p.m. . ** first half
<input type="checkbox"/> Tuesday 6:30 & 8:45 p.m.**	<input type="checkbox"/> Friday 6:30 & 8:45 p.m.**	<input type="checkbox"/> Tues 1:00 P.M.	<input type="checkbox"/> Wed 6:30 & 8:45 p.m. **second half
<input type="checkbox"/> Thursday 6:30 & 8:45 p.m.**	<input type="checkbox"/> Saturday 7:30 p.m.***	<input type="checkbox"/> Fri 9:15 A.M.	
<input type="checkbox"/> Bonspiel application included	<input type="checkbox"/> Bonspiel application included	<input type="checkbox"/> Bonspiel application included	<input type="checkbox"/> Bonspiel application included

- One application needed for each team.
- Locker Rental (optional). Please enclose a separate cheque/payment of \$32.00
- Men's, Ladies and Mixed Teams may consist of 4, 5 or 6 players.
- The 5th and 6th additional team members will be assessed a \$50.00 per person membership fee and must be paid with the team fees.
- Please provide email addresses so that you may be contacted with important Club information.
- The club may post members information on the SACC web site and team roster
- All Leagues will play 18 games, unless approved by the SACC Board; the Wednesday Beginner Open will be 2 halves of 9 games each
- The Saturday mixed may go to two draws (alternating) if there is there is the associated signup***
- Leagues marked with ** will be alternating draws.

Skip:	Name			Address		
	City	P.C.		Phone:	Bus:	Cell:
	Email :			Player Fee: \$		
3rd:	Name			Address		
	City	P.C.		Phone:	Bus:	Cell:
	Email :			Player Fee: \$		
2nd:	Name			Address		
	City	P.C.		Phone:	Bus:	Cell:
	Email:			Player Fee: \$		
Lead:	Name			Address		
	City	P.C.		Phone:	Bus:	Cell:
	Email:			Player Fee: \$		
5th:	Name			Address		
	City	P.C.		Phone:	Bus:	Cell:
	Email:			Player Fee:		
6th:	Name			Address		
	City	P.C.		Phone:	Bus:	Cell:
	Email:			Player Fee:		
Total Amount						