Castor Tritons Summer Swim Club

2017 Registration Form

Please Print:			
Family Last Name:			
Parent/Guardian Names:		1	
Returning Members:	Check here if there are no char	nges to the following:	
Mailing Address:			
Home Phone:	Work Phone:		Cell Phone:
E-mail Address:			
Doctor/Clinic:		Telephone:	
Medical Concerns:			
Alberta Health Care#:			
New members - How did you	u find out about the Castor Triton's Su	mmer Swim Club?	
■ Newspaper	A swimmer or parent	Other:	
Posters	School Newsletter		
Swimmers:			
100 market 1		_Age as of April 30th: _	
New Swimmer		Date of Birth:	
2. Name:		Age as of April 30th:	
■New Swimmer			
3. Name:		Age as of April 30th:	
New Swimmer		Date of Birth:	
4. Name:		Age as of April 30th:	
New Swimmer			
5. Name:		Age as of April 30th:	
New Swimmer		Date of Birth: _	





Personal Information Protection & Electronic Documents Act

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Club Name			
Registrant Name			
Please Read Careful A Parent or Legal Gu	y; complete and sign this fo ardian must sign for those re	rm. egistrants under the age of 18.	
The Federal Personal legislation) requires t	Information Protection & Elenation at consent be obtained pr	ectronic Documents Act (and equi ior to the collection and use of all	ivalent provinci personal inform
reasonably associate national, provincial c and competition resu	ed with the swimming activity and event registration, insurce all publication. Some of the Canada (SNC) and Swim All	o from this registration will be used ies conducted by the Club. These ince coverage, training and compinformation you provide will be poberta, for purposes including associated	purposes included the purpose
a) Ensuring swimmerb) Establishing athletc) Establishing pertin	s train and compete in an c e eligibility for selection to s ent medical records and bo	age appropriate environment; wim teams; aseline performance data to assist	coaching deci
d) Reporting non-ide	petitive or training setting; ntifying, demographic and	participation statistics to funders, s	sponsors and ot
authorized third parti e) Reporting and pu Swim Alberta web po	olishing athletes' name, ger	nder, age, club affiliation on Swimr ses and ranking reports and;	ming Canada c
f) Making direct con Swim Alberta and SN	act with registrants, volunte	eers and staff as necessary for the	operations of th
Swimming Canada co WADA (or its agents)	omplies with the obligation of oprovide information upon	and responsibility to the World Anti-l request.	Doping Agency
information may be in	ferred where its uses are ob	d from time to time. Consent for the prious and it has been voluntarily placed prior to, or at the time of collections.	provided. When
be found for SNC at:		on Policies (variously the "Policy" or Privacy and for Swim Alberta at icies.	the "Policies")
must make a request registrants may withd withdrawal however,	to the appropriate organize raw consent to use their per may require the cancellatic	nformation held by the Club, Swim ation pursuant to that organization sonal information pursuant to the F on of registration with and suspensic eir legal guardian must sign a copy	's Policy. Furthe Policies. Such a on of activities w
I hereby consent to th	e collection and use of pers	sonal information as described abo	ove.
Signature of Registran or Parent/Guardian	(age 18 or older)	Date	