

Family Name



Member Registration Form

Address

City

Postal Code

Email

Phone Numbers

Number	Location (e.g. home, mom's cell, etc.)

Contact

- about upcoming events
- to coach a team
- to help with fundraising
- to join the board
- to lead an indoor activity
- to manage a team
- to volunteer for events

Contact Info:

Include at least
 - 1 email address
 - 1 home and 1 alternate (work or cell) phone number

Alternate and home numbers for both parents preferred, where applicable.

Family Members

Name	Gender	Date of Birth	Age	School

Family Members:

Include at least 1 parent. Both parents, where applicable, and any participating children preferred. Age and date of birth not required for family members over 16 years.

Office Use:

Card No.

SNPCA Member Years

- 2007-2008
- 2008-2009
- 2009-2010
- 2010-2011
- 2011-2012

Member of

- Adelaide / Churchill CA
- Avalon CA
- Eastview CA
- Greystone Heights CA
- Lakeview CA
- Other CA: _____
- SNPCA Board
- Stonebridge CA
- Varsity View CA