

BC Diving Registration Form

Athletes & Associates 2014-2015

www.bcdiving.ca			Date Rec'd		
1. Personal 3	Informa	tion (Required	Inf	formation)	
Full name of meml	per				
Home address					
Postal Code					
Home phone					
Parent/Guardian					
Mobile or cellular phone					
Home fax					
Home e-mail addre	ess				
Birthdate (YYYY/M	M/DD)				
Gender (M / F)					
Club					
Coach					
2 Athlete M	b		_	Accesists Marshaus (#C)	
2. Athlete M				Associate Members (\$6)	
Please check appro	-	e/ 	8	Club Executive	
Learn to Dive (\$16)		8	Club: Title:		
Learn to Dive Trial (\$5)Indiv. (\$1/pp)Group		8	Parent		
Recreational (\$36)		8	Alumni		
® Masters (\$36)		8	Other		
® Comp. Prov Jr./Sr. (\$90)		8	Specify:		
® Comp. National Jr/Sr. (\$120)					
® Unattached (\$145)					
4. Fees					
Total BC Diving Registration Fees		\$			
5. Consent					
potential for bodily B.C. Section, also	injury. A _l known as l	portion of the registra BC Diving, is allocated	tion for t	re, involve certain elements of risk which involve fees paid to The Canadian Amateur Diving Association, the provision of accident insurance should injury occur. The permit my child to participate.	
Χ				Print Name	
	Parent or (Guardian if member	is u	inder 19 years of age)	

Section 1 is *required information*. Please fill in as much of the form as possible.

*** This Section must be signed for insurance to be valid for the member named on this form.

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Media Release Form

	undersigned, do hereby grant or deny permission to BO, as marked by m	
includ photo may r digital	es the display, distribution, publication, transmission, or graphs, images, and/or video taken of my child for use not be limited to, printed materials such as brochures and images such as those on the BC Diving Web site. Beny permission to use my child's image at all.	or otherwise use of in materials that include, but nd newsletters, videos, and
u Gr	rant permission to use my child's image in the following Limited usage: I want my child's image used within setting only (not in the larger community).	
	Limited usage: I want my child's image used on <u>prin</u> or video use).	nted materials only (no digital
	Unrestricted usage: I give unrestricted permission fin print, video, and digital media. I agree that these in <i>Diving</i> for a variety of purposes and that these image notifying me. I do understand that the child's last nan conjunction with any video or digital images.	mages may be used by <i>BC</i> es may be used without further
	Email notices - Allow BC Diving to send newsletters	and updates to my email.
	*Please be sure to include email address on atta	sched registration form.
Parei	nt/guardian name	
Parei	nt/guardian signature	Date

Please make a copy of this form for your own records and mail or fax the original to:

Jayne McDonald BC Diving 114-15272 Croydon Dr. Surrey, B.C. V3S 0Z5 Fax: 604-542-0387

www.bcdiving.ca

If you have questions, contact Jayne at jayne@bcdiving.ca or 604-531-5576