

BC Diving Registration Form

Athletes & Associates 2013-2014

Date Rec'd		
-		

1. Personal Information (Required Information)						
Full name of member						
Home address						
Postal Code						
Home phone						
Parent/Guardian						
Mobile or cellular phone						
Home fax						
Home e-mail address						
Birthdate (YYYY/MM/DD)						
Gender (M / F)						
Club						
Coach						
2. Athlete Members	<u> </u>	3.	Associate Members (\$6)			
Please check appropriate lev	rel	8	Club Executive			
Learn to Dive (\$16)			Club: Title:			
Learn to Dive Trial (\$5)Indiv. (\$1/pp)Group			Parent			
® Recreational (\$36)		8	Alumni			
® Masters (\$36)		8	Other			
® Comp. Prov Jr./Sr. (\$90)			Specify:			
® Comp. National Jr/Sr. (\$118)						
® Unattached (\$145)						
4. Fees						
Total BC Diving Registration Fees	\$					
5. Consent						
Notice: Springboard and Platform diving, by their nature, involve certain elements of risk which involve potential for bodily injury. A portion of the registration fees paid to The Canadian Amateur Diving Association, B.C. Section, also known as BC Diving, is allocated for the provision of accident insurance should injury occur. I acknowledge this element of risk and agree to permit my child to participate.						
X Print Name						
X Print Name (Signature of Parent or Guardian if member is under 19 years of age)						
*** This Section must be signed for insurance to be valid for the member named on this form.						

 $\textbf{Section 1} \textbf{ is } \textit{required information}. \hspace{0.5cm} \textbf{Please fill in as much of the form as possible.}$

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Media Release Form

		undersigned, do hereby grant or deny permission to BCD , as marked by my s						
inc ph ma	lude otog iy n iital	es the display, distribution, publication, transmission, or our praphs, images, and/or video taken of my child for use in our be limited to, printed materials such as brochures and images such as those on the <i>BC Diving</i> Web site.	therwise use o materials that	f include, but				
	. , ,							
u	Gra	ant permission to use my child's image in the following wa Limited usage: I want my child's image used <u>within</u> the setting only (not in the larger community).	, ,	BC Diving				
		Limited usage: I want my child's image used on <u>printed</u> materials only (no digital or video use).						
		Unrestricted usage: I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by <i>BC Diving</i> for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.						
Pa	rer	t/guardian name						
Pa	rer	t/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

BC DIVING
www.bcdiving.ca

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