Fredericton reds Track & Field

Registration form / *Formulaire d'enregistrement*

Name/*Nom*: _____ Gender/*Sexe*: M/*H* F/*F*

Birth date/*Date de naissance*:(mm/dd/yy)_____School/é*cole*:_____

ADDRESS (E): _____

_____

EMAIL (*COURRIEL*): _____ PHONE/*TÉL*.:_____

PARENTS:
PARENT 1: _____ PARENT 2: _____

PHONE/ *TÉL*.: _____ (H/*M*)) _____(H/*M*)

_____ (W/*T*) _____(W/*T*)

EMERGENCY CONTACT/ *URGENCE*: _____ PHONE/ *TÉL*.: _____

DOCTOR/ *MÉDECIN*: _____ PHONE/ *TÉL*.:_____

PRESCRIPTIONS/MEDICAL CONDITIONS/ *MALADIES*:_____

ALLERGIES: _____

MEDICARE/ *ASSURANCE MALADIE* #:_____EXPIRY/ *EXPIRATION*:_____

	YEAR/*ANNÉE*	SEASON/*SAISON*
Intermediate/Intermédiaire (born 2014 to 2015) / *(Né(e) entre 2014 et 2015)**	$285 ____	$160 ____
Athlete / **Athlète (**born 1993 to 2013) / *(Né(e) entre 1993 et 2013)**	$470 ____	$265 ____
Masters / **Maîtres** (born before 1993) / *(Né(e) avant 1993)**	$470 ____	$265 ____

*Membership does not include a required ANB registration / Les inscriptions n'incluent pas l'inscription à ANB (requise).

Volunteering

Yes____ I or my parents would be available to help in some capacity