



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/école:_____

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: _____

SEASON/SAISON

Intermediate/Intermédiaire (born 2013 to 2014) / *(Né(e) entre 2013 et 2014)** \$160 ____

Athlete / Athlète (born 1992 to 2012) / *(Né(e) entre 1992 et 2012)** \$265 ____

Masters / Maîtres (born before 1991) / *(Né(e) avant 1991)** \$265 ____

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

Volunteering

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