



MARKHAM SPEED SKATING CLUB

"GIRLS GO FAST" REGISTRATION FORM

Sunday December 18, 2016

MT JOY COMMUNITY CENTER, Markham



SKATER INFORMATION

First Name:		Last Name:		Age:
Club (if applicable):		Do you require speed skates?		
Do you have past Speed Skating experience?		<input type="checkbox"/> YES	Shoe Size: _____	
<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> NO		
If you have previous speed skating experience, please indicate your current time on:				
400m _____		500m _____		
Do you have any special dietary restrictions? If YES, please indicate below.				
Special medical information? Please indicate below.				

SKATER INFORMATION

TOTAL FEES (Pre-registration is required - payment attached).....\$25.00

PARENT(S) or GUARDIAN(S) *if under 18 yrs of age*

Mr. / Mrs. / Ms.		
Street Address	City	Postal Code
Home Phone ()	Mobile Phone ()	
Email	Other Contact option:	



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Mandatory Equipment

*In accordance with Speed Skating Canada regulation D3-100, all participants must wear hard shell helmets, neck protectors, cut and water resistant gloves or mittens, knee pads, shin guards, with no exposed skin. Ankle protectors and shatter resistant protective spot glasses (clear or yellow are greatly encouraged). Running shoes, yoga mat (some mats will be available on event day), and comfortable exercise clothing will be required for off-ice activities. Lunch is provided, however, a re-usable water bottle and snacks are recommended. **A limited amount of equipment will be available for the day, please tell us if you require any safety equipment. Please inform us of any dietary restrictions.***

WAIVER

Skating entails risks which the Markham Speed Skating Club ("the Club") endeavours to minimize. In the event of an accident, I hereby for myself, my heirs, my executors, administrators and assigns waive and release any and all rights and claims for damages I may have against the Club, the City of Markham, their agents, officers, or members for any and all injuries suffered by me while participating at the event.

Signature of Participant: _____

Signature of Parent or Guardian (if under 18 years of age): _____

I hereby give permission for images of myself/my child, captured during the GIRLS GO FAST on Sunday, December 27, 2015 through video, photo, and digital camera, to be used solely for the purposes of Markham Speed Skating Club promotional material and publications and waive any rights of compensation or ownership thereto.

YES

NO

REGISTRATIONS ARE DUE BY DECEMBER 9, 2016. PLEASE RETURN COMPLETED FORM AND PAYMENT TO:

MARKHAM SPEED SKATING CLUB
5694 Highway 7 East, Suite 407
Markham, ON L3P 0E3

Reserve your spot by emailing registration forms to info@markhamspeedskating.org
Spaces are limited.