

Registering via our online registration system is much preferred, but if not possible, please print and complete the registration and waiver forms and submit by mail or fax or in person.

**Mailing Address:
Granite Curling Club, PO Box 33057, Seattle, WA 98133
(Do not use street address!)**

**Fax Number:
Fax: 206-362-9927**

Forms must be RECEIVED by the Priority Registration Deadline to be considered for Priority Registration.

Questions? Email: registrationsupport@curlingseattle.org.

Granite Curling Club
2017/2018 League Registration

Granite Curling Club, PO Box 33057, Seattle, WA 98133
 Phone: 206-362-2446; Fax: 206-362-9927

Personal Information (Required) Please Print Clearly

Name _____ M F (please circle one) Phone: _____ (Cell?) please circle
 Address _____ Alt Phone: _____ (Cell?) please circle
 City, St, ZIP _____ Don't Share my phones with other members.
 Don't Share my address with other members. Email: _____
 Total years of curling experience (Required for certain bonspiels): _____ Don't Share my email with other members.

Annual Membership Dues -- Check One

<input type="checkbox"/> \$40 Junior U16 (provide date of birth)	<input type="checkbox"/> \$60 Junior U21 (provide date of birth)	Junior DOB	/ /
<input type="checkbox"/> \$80 Novice (Started 2016 or later)	<input type="checkbox"/> \$50 Social (No curling privileges)	Total Membership	\$
<input type="checkbox"/> \$120 General (Unlimited sub privileges)	<input type="checkbox"/> \$0 Life (you know who you are)		

League Pricing: General Members: \$300 first league; \$185 each additional league
 Novice Members: \$220 first league; \$185 each additional league
 Junior U16 & U21: \$40 Junior League; \$185 each other league

Please view the current LEAGUE OVERSUBSCRIPTION POLICY (on our website: curlingseattle.org)

Please fill-in \$ Amounts for selected leagues in the League Fees columns below. Indicate in which leagues you wish to sub in the "League Sub" Column (No additional charge).

League	League Name (Manager's Choice/Skip's Choice)	Team or Skip Name (Required for Skip's Choice Leagues)	Scheduled Draw Times	League Sub	League Fees	
					First League	Additional Leagues
<input type="checkbox"/>	Monday Night Open	MC N/A	6:30 and 8:30 PM	<input type="checkbox"/>		
<input type="checkbox"/>	Tuesday Open (Supper)	MC N/A	5:00 PM	<input type="checkbox"/>		
<input type="checkbox"/>	Tuesday Super League ¹	SC	7:00 and 9:00 PM	<input type="checkbox"/>		
<input type="checkbox"/>	Wednesday Women's	MC	6:30 and 8:30 PM	<input type="checkbox"/>		
<input type="checkbox"/>	Thursday Morning	MC N/A	10:00 AM	<input type="checkbox"/>		(\$20 Discount)
<input type="checkbox"/>	Thursday Mixed Doubles	SC	5:30 PM (Full Year)	<input type="checkbox"/>		
<input type="checkbox"/>	Thursday Men's	SC	7:00 and 9:00 PM	<input type="checkbox"/>		
<input type="checkbox"/>	Friday Juniors	MC N/A	4:30 PM	<input type="checkbox"/>		(\$40 fixed)
<input type="checkbox"/>	Friday Night Open	MC N/A	6:30, 8:30 and 10:30 PM	<input type="checkbox"/>		
<input type="checkbox"/>	Sunday Novice	MC N/A	12 Noon	N/A		(\$0 fixed)
<input type="checkbox"/>	Fall Sunday Open (Sep to Dec)	MC N/A	2:00 PM and 4:00 PM	<input type="checkbox"/>		(\$100 Discount)
<input type="checkbox"/>	Winter Sunday Open (Jan to Mar)	MC N/A	2:00 PM and 4:00 PM	<input type="checkbox"/>		(\$100 Discount)
<input type="checkbox"/>	Sunday Mixed	MC	6:00 PM and 8:00 PM	<input type="checkbox"/>		

League types are Managers Choice (MC) or Skips Choice (SC)
¹Tuesday Super League requires additional payment to League Manager

Total League Fees: \$

Locker Rental (Only complete if you have an existing locker)

Locker Number _____ \$50 Annual Locker Fee \$

Name Tag (Enter your first and last names exactly as you wish them to appear on the name tag)

Name: _____ \$0 for new GCC members, \$10 otherwise Tag Fee \$

Tax Deductible Donations

Granite Curling Club (a 501(c)3 Corporation) Donation \$

Payment: Please note that you will not be registered for any leagues without payment in full.

Please total your Membership, Leagues, Locker fees and Donation

Payment Method: Check (Include with Registration Form)
 Email me with instructions to pay online.
 I will pay at the in-person registration event.

Total Due \$

**PLEASE FILL OUT AND SUBMIT WAIVER FORM ON PAGE 3 OF THIS DOCUMENT WITH YOUR REGISTRATION.
 A COMPLETED WAIVER IS REQUIRED FOR EACH CURLING INDIVIDUAL.**

Release of Liability – Read Before Signing

In consideration of being allowed to participate in any way in the programs of **Granite Curling Club of Seattle, Inc.** ("Club") and the **United States Curling Association, Inc.** ("USCA"), their related events and activities, the undersigned, acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant. Ice is slippery and hard. The risk includes the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, **the risk of serious injury does exist**; and
2. **I knowingly and freely assume all such risks**, both known and unknown, **even if arising from the negligence of the Releasees** or others, and assume full responsibility for my participation; and
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Club and the USCA immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **hereby release the Club and the USCA**, their officers, officials, agents and/or employees, other participants including without limitation Club members and volunteers, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("Releasees"), **with respect to any and all injury, disability, death**, or loss or damage to person or property associated with my presence or participation, **whether arising from the negligence of the Releasees or otherwise**, to the fullest extent permitted by law.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Participant's signature

Age

Participant's printed name

Date signed

optional

Participant's email address (*optional*)

Emergency Contact Information

Printed name

Telephone

For Parents/Guardians of Participants of Minority Age (under age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release the Club, the USCA, and the other Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, **even if arising from the negligence of the Releasees**, to the fullest extent permitted by law.

Parent/Guardian's signature

Parent/Guardian's printed name

Date signed