



Evergreen
CURLING CLUB

Novice League Application

Name:

Address:

City:

State:

Zip:

Telephone:

PRINT EMAIL IN CAPS:

Note: your contact information will only be used for club communication purposes, and will not be made available to anyone outside of the club without your permission.

League Fees: Participation in regular weekly league play

	6:30-8:15 PM	8:30-10:15 PM	
Tuesday Evenings: 4 week league March 16 – April 6.	<input type="checkbox"/> 1 st choice	<input type="checkbox"/> 1 st choice	
	<input type="checkbox"/> 2 nd choice	<input type="checkbox"/> 2 nd choice	
Adult <input type="checkbox"/> \$80.00			
Youth <input type="checkbox"/> \$40.00			

Please mail this form, the "Release of Liability" form and your payment by check to Evergreen Curling Club attn. Steve Talley, P.O. Box 12162, Portland, OR 97212.
Make checks out to "Evergreen Curling Club". Receipts issued upon request.

For office use: Received on (date)

Check No.

Cash