

Skills Club Registration Form

Club Name _____

First Name _____ Last Name _____

Mailing Address _____
City Territory Postal Code

Phone _____ Email Address _____

Grade _____ Age _____ School _____ Counselor _____

*Health Card Number _____

**Health card numbers are requested in case of a medical emergency so treatment is as fast as possible. This information is kept confidential and is not used for other purposes.*

Emergency Contact Name _____

Daytime Phone Number _____ Evening Phone Number _____

Do you have any of the following?

Food Restrictions: Please specify _____

Medical conditions that would affect your ability to participate: Please specify _____

Allergies? Please specify _____

Special needs (physical, language, etc.): Please specify _____

Why do you want to join this Skills Club?

****** Please make sure that you read and sign page 2 of this registration form. ******

Optional Information

We want to know whether participation in our programs reflects the cultural diversity of the NWT. For this reason, Skills Canada NWT is asking people to **voluntarily** identify their race/ethnicity. The answer can be as specific or as general as you want, for example "Métis", "Scottish, English, French and Portuguese", "Tlicho", "Chinese", "Caucasian", "Asian", "Aboriginal", etc. This information will be kept **confidential** and will be used for anonymous statistics only. If you have any questions about how this information will be used, please call Jan at 873-8743. This question can be left blank.

I would describe my race/ethnicity as: _____

Skills Clubs Participant Rules and Conditions

As a participant in a Skills Canada NWT Club, I have read, understand and by signing the "Participant Registration Form" agree to the following terms:

Liability & Medical Release

I hereby agree to release Skills Canada NWT society, its representatives, agents, servants and employees from liability for any injury to the named person, resulting from any cause whatsoever occurring to the named person at any time while attending any Skills Canada NWT activities, including travel to and from these activities, excepting only such injury or damage resulting from willful acts of such representatives, agents, servants, and employees.

I do voluntarily authorize Skills Canada NWT to obtain routine or emergency diagnostic procedures and/or routine or emergency medical treatment for the named person as deemed necessary in medical judgement.

I agree to indemnify and hold harmless Skills Canada NWT for any and all claims, demands, actions, rights of action, and/or judgements by or on behalf of the named person arising from or on account of said procedures and/or treatment rendered in good faith and according to accepted medical standards.

Photo Release

I agree that still photographs and videotapes of me taken during the course of this Skills Canada NWT activity may be used and reproduced by the Society in promotional materials and bulletins.

Code of Conduct

Skills Canada NWT wants every student representative to have an enjoyable experience with maximum attention on safety and comfort. All individuals representing Skills Canada NWT official business will be expected to conduct themselves in a manner best representing this student organization.

To receive maximum benefit from your participation, the "Code of Conduct" has been established by Skills Canada NWT and must be adhered to always.

It should be noted that your assignment is voluntary, and as such you agree to abide by the official Skills Canada NWT rules and regulations or forfeit your personal rights to attend and participate. We are proud of our student's and know that by signing and returning the "Participant Registration Form" you agree to this 'Code of Conduct' and are simply reaffirming your dedication to be the best representative possible.

1. My conduct will be exemplary at all times.
2. I will attend all activities for which I am assigned and registered and will be on time.
3. I will listen and obey instructions from my coach.

I agree, if for any reason, I am in violation of the rules of the activity, I may be brought before the appropriate discipline committee for an analysis of the violation(s), and I further agree to accept the penalty imposed on me, with the understanding that all such actions are explained to me, and further I realize that the severity of the penalty may increase with the severity of the violation, even to the extent of being excluded from all further Skills Canada NWT programs.

It is with the spirit of being a proud and meaningful associate and/or member that I agree to these rules of conduct.

Having read and understood completely the 'Code of Conduct' of Skills Canada NWT society, liability, medical release and photo release do I hereby agree to follow the procedures and practices described.

I have read and understand the Participant Rules and Conditions and I agree to them.

Signature of Student/Competitor *

Parent/Guardian

Date

* If you are under 18 years of age, your parent/guardian must also sign *