

ST. ADOLPHE CURLING CLUB – 2020 / 2021 Registration Information

“Rockettes” Ladies Morning League: Tuesday Mornings, *no experience necessary!*
For registration call 883-2269 or email: CherylKennedyCourcelles@hotmail.com

Ladies League: Wednesday Nights starting Oct.9th, 6:30 & 8:45 draws

Mixed League: Friday Nights* starting Oct. 16th, 7:00 & 9:15 draws. Minimum of 1 male and 1 female required on each team; Third and Skip must alternate gender or one of these positions must be played by a U16 Junior Curler of either gender

Junior League: ON HOLD Saturday Mornings** from Oct.19th through mid-February (12 sessions), 10:30 am until 12:30 pm. Visit www.curlstadolphe.com for the registration form.

Junior Learn-to-Curl: ON HOLD Saturday Mornings** from Oct.19th through mid-February (12 sessions), 9:30 am until 10:20 am. Visit www.curlstadolphe.com for the registration form.

* Additional draw nights may be added as required

** Day of Week subject to change

(all leagues are subject to a minimum number of registrations)

MENS and LADIES LEAGUE FEES:	\$870.00 Team Fee (any number of players)
MIXED LEAGUE FEE:	\$770.00 Team Fee (any number of players)
ADULT LEARN-TO-CURL FEE:	\$75.00 per person

- *Lifetime Members (shareholders) receive a \$10.00/league reduction in fees. Lifetime memberships (shares) are available at a cost of \$100.00 per individual or \$150.00 per couple*
- *Curl Manitoba Registration Fee is included in the above fees; all players' names must be registered prior to the first league game*
- *Team Registration Fee must be paid in full prior to the first league game; payment options are cash, e-Transfer (payable to curlstadolphe@gmail.com input in message League and Team name), or cheque (payable to St. Adolphe Curling Club) we will have a debit option this year at the club. WE are trying to go cashless*

***Paperless Registration the 2020-2021 season
(All boxes need to be filled out and waivers signed)***

2020 – 2021 BONSPIELS

Men's Bonspiel: TBD
Family Funspiel: TBD (Carnival Wknd)
Mixed Bonspiel: TBD

Fundraising is essential to the long-term future of the Club. All teams are expected to participate in fundraising efforts throughout the year. Skips are responsible for distributing tickets to their teams and turning in sold tickets within the specified timeframe.

Any questions pertaining to leagues and registration can be directed to: curlstadolphe@gmail.com

2020 / 2021 LEAGUE REGISTRATION FORM: Men's Women's Mixed

TEAM INFORMATION			CURL MB INFO
Skip / Team Name:	<input type="checkbox"/> 12 & ↓ <input type="checkbox"/> 13 - 17	Gender M <input type="checkbox"/> F <input type="checkbox"/>	
Email:	<input type="checkbox"/> 18 - 29 <input type="checkbox"/> 30 - 40	Official Language: Eng. <input type="checkbox"/> Fr. <input type="checkbox"/>	
Phone: _____ Mobile: _____	<input type="checkbox"/> 41 - 55 <input type="checkbox"/> 55+	Postal Code: _____	
I consent to receiving emails from the St. Adolphe Curling Club relating to news, upcoming events, programs, etc.			YES <input type="checkbox"/> NO <input type="checkbox"/>
(for Club use) Paid by: Cash, e-Transfer, Cheque	Amount Paid: _____	Lifetime Member (y/n): _____	Received By: _____
Player 2:	<input type="checkbox"/> 12 & ↓ <input type="checkbox"/> 13 - 17	Gender M <input type="checkbox"/> F <input type="checkbox"/>	
Email:	<input type="checkbox"/> 18 - 29 <input type="checkbox"/> 30 - 40	Official Language: Eng. <input type="checkbox"/> Fr. <input type="checkbox"/>	
Phone: _____ Mobile: _____	<input type="checkbox"/> 41 - 55 <input type="checkbox"/> 55+	Postal Code: _____	
I consent to receiving emails from the St. Adolphe Curling Club relating to news, upcoming events, programs, etc.			YES <input type="checkbox"/> NO <input type="checkbox"/>
(for Club use) Paid by: Cash, e-Transfer, Cheque	Amount Paid: _____	Lifetime Member (y/n): _____	Received By: _____
Player 3:	<input type="checkbox"/> 12 & ↓ <input type="checkbox"/> 13 - 17	Gender M <input type="checkbox"/> F <input type="checkbox"/>	
Email:	<input type="checkbox"/> 18 - 29 <input type="checkbox"/> 30 - 40	Official Language: Eng. <input type="checkbox"/> Fr. <input type="checkbox"/>	
Phone: _____ Mobile: _____	<input type="checkbox"/> 41 - 55 <input type="checkbox"/> 55+	Postal Code: _____	
I consent to receiving emails from the St. Adolphe Curling Club relating to news, upcoming events, programs, etc.			YES <input type="checkbox"/> NO <input type="checkbox"/>
(for Club use) Paid by: Cash, e-Transfer, Cheque	Amount Paid: _____	Lifetime Member (y/n): _____	Received By: _____
Player 4:	<input type="checkbox"/> 12 & ↓ <input type="checkbox"/> 13 - 17	Gender M <input type="checkbox"/> F <input type="checkbox"/>	
Email:	<input type="checkbox"/> 18 - 29 <input type="checkbox"/> 30 - 40	Official Language: Eng. <input type="checkbox"/> Fr. <input type="checkbox"/>	
Phone: _____ Mobile: _____	<input type="checkbox"/> 41 - 55 <input type="checkbox"/> 55+	Postal Code: _____	
I consent to receiving emails from the St. Adolphe Curling Club relating to news, upcoming events, programs, etc.			YES <input type="checkbox"/> NO <input type="checkbox"/>
(for Club use) Paid by: Cash, e-Transfer, Cheque	Amount Paid: _____	Lifetime Member (y/n): _____	Received By: _____
Player 5:	<input type="checkbox"/> 12 & ↓ <input type="checkbox"/> 13 - 17	Gender M <input type="checkbox"/> F <input type="checkbox"/>	
Email:	<input type="checkbox"/> 18 - 29 <input type="checkbox"/> 30 - 40	Official Language: Eng. <input type="checkbox"/> Fr. <input type="checkbox"/>	
Phone: _____ Mobile: _____	<input type="checkbox"/> 41 - 55 <input type="checkbox"/> 55+	Postal Code: _____	
I consent to receiving emails from the St. Adolphe Curling Club relating to news, upcoming events, programs, etc.			YES <input type="checkbox"/> NO <input type="checkbox"/>
(for Club use) Paid by: Cash, e-Transfer, Cheque	Amount Paid: _____	Lifetime Member (y/n): _____	Received By: _____
Player 6:	<input type="checkbox"/> 12 & ↓ <input type="checkbox"/> 13 - 17	Gender M <input type="checkbox"/> F <input type="checkbox"/>	
Email:	<input type="checkbox"/> 18 - 29 <input type="checkbox"/> 30 - 40	Official Language: Eng. <input type="checkbox"/> Fr. <input type="checkbox"/>	
Phone: _____ Mobile: _____	<input type="checkbox"/> 41 - 55 <input type="checkbox"/> 55+	Postal Code: _____	
I consent to receiving emails from the St. Adolphe Curling Club relating to news, upcoming events, programs, etc.			YES <input type="checkbox"/> NO <input type="checkbox"/>
(for Club use) Paid by: Cash, e-Transfer, Cheque	Amount Paid: _____	Lifetime Member (y/n): _____	Received By: _____

Return completed form on Registration Night or email in advance to curlstadolphe@gmail.com