PAKMEN VOLLEYBALL

Registration Form
Please mail with payment to:
Pakmen Volleyball
1703-350 Rathburn Rd West, Mississauga, ON, L5B3Y2

Office Use Only

Player Information

_____ ☐ Female ☐ Male

Player's First Name Player's Last Name

_____

Address

_____

City Postal Code Phone Number

_____

Email Address (Confirmation & Tax receipt will be sent via email) Player's Year Of Birth

_____

Parent/Guardian's Name Medical Concerns

	Program Name	Location / Time	Start date	Total Amount ($)
1.				
2.				
3.				

Method of Payment Make cheques payable to: Pakmen Volleyball Club

☐ Cash ☐ Visa ■ Mastercard ☐ Cheque

Would you like to donate $2.00 to the Pakmen Community Fund? ☐ Yes ☐ No

_____

Total Payment

$ ___ ___ ___ . ___

_____

Card Number (if paying by credit card) Expiry (Month/Year)

_____

Cardholder's Name **Cardholder's Signature (required to process)**

Personal information & photo release, waiver and indemnification: I understand Pakmen gathers personal information about each of its participants, including name, address, email, telephone number, gender and date of birth. This information is used for the purposes of communication from Pakmen with its regard to Pakmen programs, events, promotions, and sponsorships. Pakmen never shares this information. I understand and agree that Pakmen and/or any of its coaches, program coordinators, officials, affiliates, or sponsors are not responsible for any injury, damage or loss resulting from my accident from known or unknown conditions however caused.

In the event that a customer is unable to attend a session(s), makeup class (es) will not be offered. Withdrawals with a full refund up to one week before the start of the program will be charged a $25 administration fee, unless a doctor's note is provided. Withdrawals after this date, but before the start of the program will be charged a $50 administration fee, unless a doctor's note is provided. No refunds will be issued after the start of this program, unless a doctor's note is provided.

Parent signature Date