



BC WRESTLING MEMBERSHIP

WHAT INFORMATION DO I NEED TO COLLECT TO REGISTER A MEMBER?

The purpose of this form is to assist coaches and team managers/admin with collecting information prior to registering members to their team. When purchasing a BC Wrestling Membership, each of the information sections below will be required to be filled in when registering. We advise coaches and admin to collect this information prior to registering their team to ensure a smooth registration process.

REGISTRANT INFORMATION

Full Name: _____

Date of Birth (year-mm-dd): _____

Age: _____

Email: _____

Gender: _____

Member Street Address: _____

Member Postal Code: _____

Phone Number: _____

EMERGENCY CONTACT INFORMATION

Emergency Contact Name: _____

Emergency Contact Number: _____

OPTIONAL INFORMATION

(Y/N/PREFER NOT TO DISCLOSE)

Would you like to receive information from BC Wrestling Association through email (Y/N): _____

Do you identify as indigenous: _____

Do you have any physical disabilities: _____

WAIVERS -(MINORS)

What is the parent/guardians last name: _____

What is his persons relationship with the athlete: _____

What is the parent/guardians email address: _____