



## NEW MEMBER SIGN-UP FORM

LAST NAME:

FIRST NAME:

STREET ADDRESS:

CITY:

PROVINCE/STATE:

POSTAL / ZIP CODE:

EMAIL:

PHONE:

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**ADULTS:** Can you volunteer to help out for a game or two, during intermissions in November, January or February?

YES

NO

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**14 YEARS OR UNDER?**

BIRTHDAY (dd/mm/yyyy)

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**Favorite Player:**