



2021-2022 Registration Form

QCMA Building
1256 Cornwall Street
Regina, SK.

Please PRINT Information

First Name:		Last Name:		Gender:	
Birthdate (dd/mm/yyyy) / /			Age:	Belt Rank:	
Mailing Address:			City/Town:		Province:
Postal Code:		Email:			
Home Phone:		Work Phone:		Cell Phone:	
Health Card #:		Health Notes:			
Guardian 1:			Guardian 2:		
Relation:			Relation:		
Phone #:			Phone #:		

I understand that this is a physical sport that contains an element of hazard and, in this respect, I accept the full responsibility of the presence of this member in this program, and release the Regina Y Judo Club, its coaches, volunteers and its employees of any and all liability, for any and all damages or injury, however caused. I have carefully read this agreement and fully understand its contents. I am aware that this is release of liability and waiver of claims and accept it of my free will.

I understand and agree to the refund/withdrawal policy. The Regina Y Judo Club will not provide refunds this season as Judo Canada membership and Judo Sask membership cannot be refunded and these make up over 50% of the COVID 19 special fees this year. Fees will also be paid in full and no monthly option will be available.

I Authorize Regina Y Judo to use photos of myself for educational or promotional purposes in any type of media including its website **yes no**

Signature: _____ Date: _____



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Classes	Times	Season	Cost	Select Course
Kinder Judo Ages 5-6 Born 2015-16	Tuesday 6:15-7:05PM	Aug 31 - Apr 26	Full Payment \$250	
Youth I Ages 7-9 Born 2012-14	Tuesday & Thursday 7:15-8:15PM	Aug 31 - Apr 28	Full Payment \$350	
Youth II Ages 10-12 Born 2009-11	Tuesday & Thursday 7:15-8:15PM	Aug 31 - Apr 28	Full Payment \$350	
Teen/Adult Born 2008 and before Ages 13+	Monday & Wednesday 7:30-9:00PM Saturday 12:45-2:15PM	Aug 30 - May 29	Full Payment \$600 Monthly \$100+ \$60/month	

I give my consent for my child to participate in Judo and related activities at the Regina Y Judo Club. I understand that this is a physical sport that contains an element of hazard and, in this respect, I accept the full responsibility of the presence of this member of my family in this program, and release the Regina Y Judo Club, its coaches, volunteers and its employees of any and all liability, for any and all damages or injury, however caused. I have carefully read this agreement and fully understand its contents. I am aware that this is release of liability and waiver of claims and accept it of my free will.

I Authorize Regina Y Judo to use photos of myself/my child for educational or promotional purposes in any type of media including its website yes no

I understand and agree to the refund/withdrawal policy. The Regina Y Judo Club will provide partial refunds (less Judo Canada membership, Judo Sask membership and 10% administration fees). For every week as a member of the club the 10% of the total refund will be deducted (no refunds after 10 weeks of membership).

Parent/Guardian Signature: _____

Date: _____

Payment Details	Judo Gi	Quantity	Payment Type
Class _____			<input type="checkbox"/> Cash \$ _____ <input type="checkbox"/> Cheque \$ _____ <input type="checkbox"/> Void Cheque/Direct Deposit Slip
<input type="checkbox"/> Pay in Full			
<input type="checkbox"/> Monthly			
Make Cheques Payable to Regina Y Judo Club			