



BC DEAF CURLING PLAYDOWN ENTRY FORM



DATE: Saturday, March 7, 2020

TIME: 2:30pm, 5:30pm, 8:30pm

WHERE: Royal City Curling Club: 75 East 6th Avenue, New Westminster

Team Name: _____ Men () Women ()

Full Name:	
Full Address:	
Email or Text	

RANK **	PRINT FULL NAME **	Member of BCDSF	SIGNATURE
SKIP			
THIRD			
SECOND			NO SIGNATURE NEED
LEAD			NO SIGNATURE NEED
SPARE			NO SIGNATURE NEED
COACH			NO SIGNATURE NEED

** All participants are required to be active members of BC Deaf Sports Federation.

Upon acceptance of entry, listed players understand that they are agreeing to abide by the official rules and code of conduct of the local club and BCDSF. It is the Team's responsibility to know that all players are active member of BCDSF before the event, otherwise the team will be disqualified.

BC Deaf Sports Federation
#4 – 320 Columbia Street
New Westminster, BC V3L 1A6

Amount: \$200.00 _____
 Cash/Cheque/E-transfer
 Date: _____
 Non-refundable

Deadline to submit is Wednesday, February 12, 2020