



Chilliwack Centre of
excellence
PADDLING CLUB

Membership Application Form

Please return to: Patsy Capstick
72 – 44523 McLaren Dr.
Chilliwack, BC, V2R 0C2
ccekayak.members@gmail.com

2018-2019

Valid April 1, 2018 - March 31, 2019

First Name: _____		Last: _____	
Street: _____			
City: _____		Postal Code: _____	
Canadian anti-spam legislation / email waiver		Licence Plate#: _____	
Email Address: _____		Phone: () - _____	
<input type="checkbox"/> YES send me emails about club events <input type="checkbox"/> NO you may not send event email but may use for emergency contact		Date today: M D Y	

	Name	Birth Date M D Y	Gender M F	Signature	Number	\$ Amount
1			M F			\$
2			M F			\$
3			M F			\$
4			M F			\$
5			M F			\$
6			M F			\$


Membership options

choose one for each person registering

Membership requires renewal by April 1 of each year	Recreational Fees (Upgrade to competitive by paying difference)	Competitive Fees (Members receiving coaching as part of a competitive program and/or seeking other support from CCEPC or its partners/associates during the season)
Cadet (5 to 14)	18 & under \$20/yr	\$40 / year
Junior (15 to under 19) U23 (19 to 22)		\$85 / year
Senior (23 to 34) Master (35 to 64)	Adult \$40/yr	\$90 / year
FOG (65 and up)		\$100 / year
Officials Membership	Level Achieved and Date:	\$75 / year
Coach Membership		\$65 / year
Type of coach:	Technical	Practical Theory

CCE photo/video waiver

This form is a permission form to allow CCE to use any photos or video taken in a video/slide show to promote CCE activities in print or on the web. No photos/videos will be used without permission from a parent/guardian. Photos/videos will not be given to anyone outside of CCE.



I give permission to CCE to use any video or photos taken of me for advertising purposes.

Member's signature or parent/ guardian if under 18

Disclaimer

Canoe/kayaking activities by their nature involve certain elements of risk which involve potential for bodily injury. A portion of the registration fees paid to CCE (Chilliwack Center of Excellence) are allocated for the provision of accident insurance should injury occur. I acknowledge this element of risk and agree to permit myself/child to participate.

Member's signature or parent/guardian if under 18

Total Amount Paid

\$