



## Member Registration

\* mandatory fields \*\* (if applicable)

Legal First Name: *		Legal Last Name: *	
Legal Middle Name:		Email: *	
Username: ** (for database access, default <firstname.lastname>)		City: *	
Address: *		Postal Code: *	
Province: *		Secondary Phone #:	
Primary Phone #: *		Language: *	<input type="checkbox"/> English <input type="checkbox"/> French
Gender: *	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (dd/mo/year): *	
Province of Registration: *		Parent /Guardian email (if under 18): *	
Parent /Guardian name: *		Parent /Guardian phone #: *	
Club: *		Picture upload:	Must send .JPEG file to club registrar
Secondary Club: **		First Year of Registration: **	
Tertiary Club: **			
Membership Type: *	<input type="checkbox"/> Volunteer <input type="checkbox"/> Introduction Member <input type="checkbox"/> Provincial <input type="checkbox"/> Competitive	Role: * <i>Please select at least 1</i>	<input type="checkbox"/> Alumni <input type="checkbox"/> Athlete <input type="checkbox"/> Coach <input type="checkbox"/> Official <input type="checkbox"/> Volunteer
<b>Alumni Details **</b>			
Former National	<input type="checkbox"/> Yes	Years on National	

Team Athlete: *	<input type="checkbox"/> No	Team:	
<b>Coach Details **</b>			
NCCP Number:		Coaches of Canada Number:	
<b>Official Details **</b>			
Province: *		Level: * <i>Please select only 1</i>	<input type="checkbox"/> Community Sport <input type="checkbox"/> Regional <input type="checkbox"/> Provincial <input type="checkbox"/> National C <input type="checkbox"/> National B <input type="checkbox"/> National A <input type="checkbox"/> UANA <input type="checkbox"/> FINA <input type="checkbox"/> FINA- Retired
Course Conductor: <i>Please select at least 1</i>	<input type="checkbox"/> Minor Official <input type="checkbox"/> Community Sport <input type="checkbox"/> Regional <input type="checkbox"/> Provincial <input type="checkbox"/> National		Evaluator Level: <i>Please select at least 1</i>
<b>Volunteer Details **</b>			
Valid background check on file: *	To be completed by the PSO		
<b>Activities: ** Please select all activities participated during previous season</b>			
<input type="checkbox"/> Provincials	<input type="checkbox"/> 16U Boys' NCC	<input type="checkbox"/> 16U Girls' NCC	<input type="checkbox"/> 18U Men's NCC
<input type="checkbox"/> 18U Women's NCC	<input type="checkbox"/> 22U Men's NCC	<input type="checkbox"/> 22U Women's NCC	<input type="checkbox"/> Senior Men's NCC
<input type="checkbox"/> Senior Women's NCC	<input type="checkbox"/> CSL	<input type="checkbox"/> MLWP Men	<input type="checkbox"/> MLWP Women
Provincial Team Joint Training/Competitions (specify):			