

Saugeen Shores BMX Racing Club

Registration and Health Form 2009

Category: Novice Intermediate Expert Cruiser

T-shirt size: Child: 4-6, 8-10, 12-14 Youth: S M L Adult: S M L XL

Name: _____ **Male / Female**

Name of Parent(s) or Guardian: _____

Address: _____

Birthdate: (d/m/y) ___/ ___/ ___/ **Age as of December 31, 2009** _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Family Doctor: _____

Doctor's phone number: _____

Date of Last Tetanus Shot: _____

Past Medical History: _____

Allergies, Physical disabilities: _____

Medication Taken: _____

Other: _____

Payment option:

(Details on the back) Option 1 \$130 Option 2 \$70

(Please make cheques payable to Saugeen Shores BMX)

