



2012 CANADIAN CHAMPIONSHIPS – Laval PQ

INDOOR SPEED – APRIL, 14 & 15 – MAINSTREAM EVENTS - ENTRY FORM

NAME: _____ RSC #: _____
Last First

PROVINCIAL AFFILIATION: _____

ADDRESS: _____ PROVINCE: _____ POSTAL CODE: _____

PHONE NUMBER: (____) _____ CELL NUMBER: (____) _____

EMAIL: _____ CLUB AFFILIATION: _____

Male Female Date of Birth (Y/M/D) _____ AGE: _____ (As of January 1, 2012)

INDOOR AGE DIVISIONS

Events: (by age as of January 1, 2012) – DIFFERENT FROM OUTDOOR RACING

Division	Age	-X-	Division	Age	-X-	Division	Age	-X-
Juvenile	9 & under		Novice	13 & over		Senior	18 & over	
Elementary	10 & 11		Sophomore	14 & 15		Classic	27 & over	
Pre Novice	12 & under		Junior	16 & 17		Masters	35 & over	
Freshman	12 & 13		Intermediate	18 & over		Grand Masters	45 & over	

2 Person

2 PERSON RELAY DIVISIONS

Division & Age	Male Partner	Female Partner	Mixed Partner
Elementary - 8, 9, 10 & 11			
Sophomore - 12, 13, 14 & 15			
Senior - 16 & over			
Masters - 27 & over			

3 Person

3 PERSON RELAY DIVISIONS

Division & Age		
Elementary - 8, 9, 10 & 11	1:	2:
Sophomore - 12, 13, 14 & 15	1:	2:
Senior - 16 & over	1:	2:

4 Person

4 PERSON RELAY DIVISIONS

Division & Age	Male Partners	Female Partners	Mixed Partners
Elementary - 8, 9, 10, & 11	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
Sophomore - 12, 13, 14, & 15	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
Senior - 16 & Over	1.	1.	1.
	2.	2.	2.
	3.	3.	3.

Note: All participants must be current members in good standing with RSC.

Name: _____

Entry fees will be increased by \$20 per skater on April 1st until the online entry deadline: April 12th. On race day, entry is increased by \$30 extra per skater.

ONE ENTRY FORM PER PERSON

The appropriate fee must accompany all forms.

OPTIONS FOR RSC MEMBERS ONLY

Family Rates:	1st Skater		Full Rate
	2nd Skater		\$10.00 Deduction
	additional Skaters		\$20.00 Deduction

A) Basic entry fee \$60.

B) Each relay – add \$5

All Cheques or Money Orders are to be made payable to: **VRL Le Club. (\$20.00 charge for any NSF cheque.)**

Basic Entry A)	Family Rate Yes / No	Total of Relays Entered B) (? x \$5)	Grand Total Fees
\$		+\$	=\$

IN CASE OF EMERGENCY, I GIVE MY PERMISSION TO BE TAKEN TO THE NEAREST HOSPITAL AND TREATED

Emergency Contact Person & Phone # : _____

Please send Entry Forms plus payment to: CLAUDIA THIBODEAU
Secretary VRL Le Club
5952 Place Tousignan Apt # 101
Laval, Quebec H7K 3Z4
E-Mail: info@vrlleclub.com

As with any sport, a certain amount of risk is involved. I understand clearly that by signing this release, I will be forever prevented from suing or otherwise claiming against Roller Sports Canada, FVPQ and the VRL Inline Le Club, or their officers, employees or volunteers for any loss or damage connected with any property loss or personal injury that I sustain while participating in or preparing for any skating activity, whether or not such loss or injury is caused solely or partly by the negligence of Roller Sports Canada, FVPQ and the VRL Le Club, or their officers, employees or volunteers.

I hereby certify that the information given is true and correct

Signature: _____ Date: _____, 2010
(Parent or Guardian if under 18)

For Admin Use Only Date Received _____
