


 Age Division		 Birth Year	
Birth Month		Birth Day	
Last Name		Given Name(s)	
Address:			
City:		Postal Code:	
Primary Email:			
Mother/Guardian Name:		Father/Guardian Name:	
Cell phone		Cell phone	
Y or N	Are you interested in coaching?	Y or N	Are you interested in coaching?
Y or N	Are you interested in volunteering?	Y or N	Are you interested in volunteering?
Names of any Registered Siblings:			
Special Requests:			
Please Make Cheques Payable to : SC Lacrosse			
Amount Paid:		Payment Method: Cash/Cheque	
Cheque #		Early Discount: Y or N	
Parent Signature :		Date:	
Registrar Signature:		Date:	
Please Mail Completed Registration Forms and Payment to:  Swift Current Lacrosse Box 654 Swift Current , Saskatchewan S9H 3W4 			
" It's not the size of the dog in the fight..... ..it's the size of the fight in the dog." - Mark Twain			