MOOREDALE

Program Registration Form

Please return with payment to "Mooredale House"
146 Crescent Road, Toronto, ON, M4W 1V2
Phone: 416.922.3714
Fax: 416.922.4523
E-mail: programs@mooredale.on.ca
Website: www.mooredale.org

Please read the Program Policies before registering

Payment – Please PRINT CLEARLY

I will be paying by: ❒ Cash ❒ Cheque ❒ Debit ❒ Master Card ❒ Visa Card	The amount of: $
Card #: | | | | | - | | | | | - | | | | | - | | | |	exp | m | m | - | y | y
Full name that appears on the credit card	Card holder SIGNATURE

PARENT INFORMATION

RMPA #	First Name	Last Name	
Street Address	Suite	City	Postal Code
Phone	Bus. Phone (ext.)		Cell
Email			Preferred Contact: ☐ Email ☐ Phone

❑ Please renew our family membership at Mooredale and add the cost of $100 to my credit card if my current membership has expired or will expire during the program. (Membership fee subject to change January 1, 2011)

PARTICIPANT 1: INFORMATION

First Name	Last Name		
Birth date (dd/mm/yy)	Health Card Number		
1st CProgram Name	Time	Day	Fee
2nd Program Name	Time	Day	Fee
3rd Program Name	Time	Day	

PARTICIPANT 2: INFORMATION

First Name	Last Name		
Birth date (dd/mm/yy)	Health Card Number		
1st CProgram Name	Time	Day	Fee
2nd Program Name	Time	Day	Fee
3rd Program Name	Time	Day	Fee

AUTHORIZATION

"I am a member of the Rosedale-Moore Park Association, and consent to the participation of the above-named and hereby release the Rosedale-Moore Park Association, its staff, Board of Directors, instructors and authorized guests from any and all actions, claims, demands for damages, loss or injury howsoever arising which may hereafter be sustained by the participant as above-named in consequence of participation in Association activities. I also consent to the use by the Rosedale-Moore Park Association of the participant's likeness (photographs, video) for publicity purposes."

Signature Date