rtsh annrteil annrteil annrteil annrteil annrteil annrteil annrteil annrteil annrteil annrteil annrteil annrteil annrteil	OPOLIAR ANNUAL			
	to Cancer Care in Niagara tamount of pledges is \$250 per curler			
	games, lunch, gift bag, and prizes for all curlers.			
 * Top individual fund-raiser wins a \$700 Travel voucher * 2nd fund-raiser wins \$500, 3rd wins \$400, and 4th wins \$300 travel voucher * Each \$100 in pledges receives ticket for draw on: 2 - \$300 travel vouchers, 2 - \$150 Coppola's Gift Cards, & 2 - \$150 Keg Gift Cards. * Silent Auction Table with many fabulous items * 24 Teams will play two six end games (two draws 9 and 11) 				
Please make entry fee cheques payable to St. Catharines Golf & Country Club and send it with this registration form to Frank Strathearn, St. Catharines Golf & Country Club, 70 Westchester Ave, St. Catharines, ON, L2R 3P4. Entries to be submitted no later than February 17th, 2018.				
Entry Form: (please print clearly) Entry	Form is also available at www.stgcc.com			
Team Contact:	Phone:			
Team Name:	E-Mail:			
Skip:	Vice:			
Second:	Lead:			
Preferred Draw: \Box 9:00 am \Box 11:00 am	Shirt Sizes: 🗆 XL 🗆 L 🗆 M 🗆 S			
Contact Frank Strathearn Royal LePage Niagara Realestate Centre Brokerage fstrathearn@royallepage.ca 905-937-6000 Office 905-321-3075 Cell				

PLEDGE SHEET

Annual Rankin Construction CURL FOR CANCER CARE

February 24, 2018

St. Catharines Golf & Country Club

Participant Name:					
SPONSOR'S NAME	MAILING ADDRESS & POSTAL CODE	PLEDGE \$	RECEIPT REQUIRED	PAYMENT RECEIVED	

Page Total: \$

PLEDGE SHEET Annual Rankin Construction CURL FOR CANCER CARE February 24, 2018 St. Catharines Golf & Country Club

Participant Name:					
SPONSOR'S NAME	MAILING ADDRESS & POSTAL CODE	PLEDGE \$	RECEIPT REQUIRED	PAYMENT RECEIVED	

Page Total: \$

PLEDGE SHEET

Annual Rankin Construction CURL FOR CANCER CARE

February 24, 2018

St. Catharines Golf & Country Club

SPONSOR'S NAME		MAILING ADDRESS & POSTAL CODE	PLEDGE \$	RECEIPT REQUIRED	PAYMENT RECEIVED
Contact Information		This Page Total: \$ Page 1 Total: \$			
Participant's Name:			Page 2 Total: S Total PLEDGES: S		
Home Address:		<u> </u>	OFFICE USE ONLY \$ RECEIVED: \$		
City:			\$ OWING: \$		
Phone:	E-mail:		RA	make cheque paya NKIN CANCER R Cancer Care in Niag	UN

Terms & Conditions: by submitting this entry, I acknowledge having read, understood and agreed to the terms of the waiver on this entry form. I warrant that I am physically fit to participate in this event.

Waiver: In consideration of the acceptance of my application as an entrant in the 2017 RANKIN CONSTRUCTION CURL FOR CANCER CARE, I myself, my heirs, executors, administrators, successors and assigns hereby release, waive and forever discharge RANKIN CANCER RUN, and all other associations, sanctioning bodies and sponsoring companies and all their respective subsidiaries, agents, officials, servants, contractors, representatives, elected and appointed officials, successors and assigns, of and from all claims, demands, damages, loss, expenses, actions, causes of action, whether in law or in the said event whether as a participant or otherwise whether prior to, during, or subsequent to the event and notwithstanding that same may have been contributed to or occasioned by the negligence of any of the aforesaid. I further hereby undertake to hold and save harmless and agree to indemnify all the aforesaid from and against all liability, incurred by an or all of them arising as a result of, or in any way connected with, my participation in the said event. I grant full permission for organizers to use photographs of me and quotations from me in legitimate accounts and promotions of this event.

Page 3 Curler's Signature (or Guardian if under 18):