

GAUTENG CANOE UNION REGISTRATION FORM

C.S.A REGISTRATION NUMBER	<input type="text"/>	CLUB	<input type="text"/>
NAME	<input type="text"/>		
ID NUMBER/PASSPORT NUMBER	<input type="text"/>	SURNAME	<input type="text"/>
	<input type="text"/>	DATE OF BIRTH	<input type="text"/>
MARITAL STATUS	MARRIED <input type="text"/>	SINGLE <input type="text"/>	SHIRT SIZE <input type="text"/>
GENDER	MALE <input type="text"/>	FEMALE <input type="text"/>	
RACE	WHITE <input type="text"/>	BLACK <input type="text"/>	INDIAN <input type="text"/>
	COLOURED <input type="text"/>	ASIAN <input type="text"/>	OTHER <input type="text"/>
CELLPHONE	<input type="text"/>		
EMAIL	<input type="text"/>		
POSTAL / PHYSICAL ADDRESS	TOWN	<input type="text"/>	
	SUBURB	<input type="text"/>	
	ADDRESS 1	<input type="text"/>	
	ADDRESS 2	<input type="text"/>	
	CODE	<input type="text"/>	
NEXT OF KIN	NAME	<input type="text"/>	
	CONTACT	<input type="text"/>	
	CONTACT NUMBER	<input type="text"/>	
DISCIPLINE INTEREST	POLO <input type="text"/>	WILD WATER <input type="text"/>	RODEO <input type="text"/>
	MARATHONS <input type="text"/>	DRAGON BOAT <input type="text"/>	SLALOM <input type="text"/>
	SPRINTS <input type="text"/>	OFF SHORE RACING <input type="text"/>	SURF-SKI <input type="text"/>
OCCUPATION TYPE	<input type="text"/>		
	EMPLOYMENT POSITION	<input type="text"/>	
MEDICAL AID COMPANY	<input type="text"/>		
	MEDICAL AID NUMBER	<input type="text"/>	
SENIOR	<input type="text"/>	SENIOR DEVELOPMENT FIRST YEAR	<input type="text"/>
JUNIOR	<input type="text"/>	SENIOR DEVELOPMENT	<input type="text"/>
FIRST YEAR JUNIOR	<input type="text"/>	U23 DEVELOPMENT	<input type="text"/>
JUNIOR DEVELOPMENT	<input type="text"/>	FULL TIME STUDENT	<input type="text"/>
3RD FAMILY MEMBER	<input type="text"/>		<input type="text"/>

DECLARATION

I declare that I am a bona-fide amateur. I undertake to comply with any rules, regulations and directions applicable to the sport of canoeing. I acknowledge that Canoeing South Africa, it's affiliated Unions, the Gauteng Canoe Union and it's affiliated clubs, servants or agents are exonerated from and indemnified against any loss or damage resulting directly or indirectly from any participation in canoeing related activities. In the event of death, permanent disablement or any other loss, my heirs shall similarly have no claim. I will submit to drug testing, whenever or wherever requested. When entering a race run under the auspices of GCU or CSA, I do so at my own risk.

SIGNATURE

DATE

MINORS(UNDER THE AGE OF 21 YEARS)

I, the parent/guardian of the abovementioned person, permit him/her to participate at his/her own risk and responsibility and exonerate all bodies and persons concerned from, and indemnify them against any loss or damage resulting directly or indirectly from his/her participation.

SIGNATURE

DATE