



# Registration Form

## CAMPER INFORMATION

Participant Name :

Parent/Guardian:

Date of Birth  
(D/M/Y):

  /   /  

Email :

Phone #:

Camp:

Volleyball 11-13

Volleyball 14-16

Soccer 7-12

Soccer 11-16

Mini U & Badminton

Badminton 8-11

Badminton 12-16

Shirt Size:

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Parent/Guardian  
Signature

## LANGILLE ATHLETIC CENTRE

A : 20 Cumming Dr, Bible Hill, NS, B2N 2R8

P : 902-893-6660

E : Rams@dal.ca

**THANK YOU FOR REGISTERING**

Please send this completed form to Rams@dal.ca