



Multiple registrants must be Members of the same (legal) family.

Registrant #1

Legal (Mundane) Name		SCA Name		Branch	
Adult <input type="checkbox"/>	Minor Age	Membership Status <input type="checkbox"/> SCA (Blue) <input type="checkbox"/> SCA (White) <input type="checkbox"/> Non Member		SCA Membership #	Expiry Date:
Minor * <input type="checkbox"/> * Waiver Required					
Required Contact Info:	Phone Number		E-Mail Address		

Registrant #2

Legal (Mundane) Name		SCA Name		Branch	
Adult <input type="checkbox"/>	Minor Age	Membership Status <input type="checkbox"/> SCA (Blue) <input type="checkbox"/> SCA (White) <input type="checkbox"/> Non Member		SCA Membership #	Expiry Date:
Minor * <input type="checkbox"/> * Waiver Required					
Required Contact Info:	Phone Number		E-Mail Address		

Registrant #3

Legal (Mundane) Name		SCA Name		Branch	
Adult <input type="checkbox"/>	Minor Age	Membership Status <input type="checkbox"/> SCA (Blue) <input type="checkbox"/> SCA (White) <input type="checkbox"/> Non Member		SCA Membership #	Expiry Date:
Minor * <input type="checkbox"/> * Waiver Required					
Required Contact Info:	Phone Number		E-Mail Address		

Registrant #4

Legal (Mundane) Name		SCA Name		Branch	
Adult <input type="checkbox"/>	Minor Age	Membership Status <input type="checkbox"/> SCA (Blue) <input type="checkbox"/> SCA (White) <input type="checkbox"/> Non Member		SCA Membership #	Expiry Date:
Minor * <input type="checkbox"/> * Waiver Required					
Required Contact Info:	Phone Number		E-Mail Address		

SUMMARY OF FEES

		Qty	Total \$
Adult	\$20	_____	_____
Youth	\$10	_____	_____
Child	Free	_____	_____
Family Cap	\$50	_____	_____
		Total	_____

Note: Adult (18+); Youth (12-17);
Child (Under 12)

Registration #

Payment due in Canadian Funds
Make cheques payable to "**Shire of Danescombe**"

Cheques, registration forms, waivers & membership can be mailed to:

HL Taliesin ap Hafgan (mka: Bill Litwin)
11 – 1831 Ambrosi Rd
Kelowna, BC Canada V1Y 4R8
250-860-9976
taliesin.ap.hafgan@shaw.ca