



Squadron Sponsoring Committee

909 Peregrine Squadron

Royal Canadian Air Cadets

SSC ANNUAL REGISTRATION FORM



Your personal information will always be kept private and will not be used for any purpose other than Sponsoring Committee and/or Squadron business.

If any of your contact information changes during the year, please inform the Sponsoring Committee Chairperson or Secretary as soon as possible.

DATE: _____

Cadet 1 Info	First Name:			Last Name:		
	Cadet Email:				Date of Birth:	
Cadet 2 Info	First Name:			Last Name:		
	Cadet Email:				Date of Birth:	
Cadet 3 Info	First Name:			Last Name:		
	Cadet Email:				Date of Birth:	
Parent / Guardian Info	First Name:			Last Name:		
	Address:					
	City:				Postal Code:	
	Phone (Home):			Phone (Cell):		
	Parent Email:					
	Food Safe Certificate:	Yes				
	No					
Additional Parent / Guardian Info <i>(if applicable)</i>	First Name:			Last Name:		
	Address:					
	City:				Postal Code:	
	Phone (Home):			Phone (Cell):		
	Parent Email:					
	Food Safe Certificate:	Yes				
	No					

** OFFICE USE ONLY **

<i>Amount Due:</i>			<i>Date of Payment:</i>		
<i>Amount Received:</i>			<i>Receipt #:</i>		<i>Cheque #:</i>
<i>Payment recorded and received by:</i>	(print)			(Sign)	
<i>Payment Type:</i>	<i>Cash:</i>		<i>SSC Notes:</i>		
	<i>Cheque:</i>				
	<i>Email Transfer:</i>				
	<i>Credit Card Online:</i>				