



# Edmonton Sabers Marching Band

P.O. Box 69004 Edmonton, Alberta CANADA T6V 1G7  
<www.edmontonsabers.com> <edsabers@edmontonsabers.com>  
(780) 476-8152

## SABERS REGISTRATION FORM (August 2010-July 2011)

Child's NAME	Phone (780)
ADDRESS	e-Mail
CITY/Prov.	Alt Phone 1
POSTAL CODE	Alt Phone 2
Birth date	Alberta Health Care #

### Child's choice of instrument

Brass: e.g. trumpet, trombone, baritone, mellophone, susaphone

Woodwind: e.g. clarinet, flute, piccolo, saxophone

Percussion: e.g. cymbals, bass drum, snare drum, tritoms

1st choice: \_\_\_\_\_ 2nd choice: \_\_\_\_\_

*How did you hear about Sabers?*

or check for **Colourguard** \_\_\_\_\_ or **National** (siblings, ages 6-7) \_\_\_\_\_  
any previous experience? \_\_\_\_\_ (not required)

### Parent(s) / Guardian(s) contact information

Parent Name 1	Parent Name 2
Address	Address
City/Prov.	City/Prov.
Postal Code	Postal Code
e-Mail	e-Mail
Home Phone	Home Phone
Work & Cell Phones	Work & Cell Phones

**Family information** of which the Band should be aware: e.g. alternate emergency contacts, other parents/guardians/relatives/friends to whom the band member may be released.

Name(s) \_\_\_\_\_

Relationship(s) \_\_\_\_\_

Phone numbers \_\_\_\_\_

I/We have read, agree to, and signed the Conditions (overleaf) and hereby authorize my/our son/daughter/ward to join the Edmonton Sabers Marching Band.

\_\_\_\_\_  
Parent(s)/Guardian(s) signature(s)

\_\_\_\_\_  
printed name(s)

Date: \_\_\_\_\_

see OVER →

**SABERS CONDITIONS DOCUMENT** (August 2010-July 2011)

Child's NAME	Phone (780)
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**Child's medical information**

Please note if your child has any of these conditions:

asthma    bedwetting    headaches    motion sickness    sleepwalking

Other conditions (including religious restrictions) of which the Band should be aware:

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Allergies? Please specify, along with emergency treatment required:

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**Consent / Release / Waiver**

I/We, the undersigned, do hereby agree to the following:

In permitting my/our child/ward to join and participate in the activities of the Edmonton Sabers Marching Band ("the Band"), I/we hereby release, waive and forever discharge the Band, its directors, officers, employees, volunteers, servants and agents, from any and all claims, demands and actions occurring during or arising from participation in Band activities or while under the supervision and care of the Band, its directors, officers, employees, volunteers, servants and agents.

In consideration of the Edmonton Sabers Marching Band delivering uniforms, instruments, equipment, etc. for use by the child, I am/we are responsible for the safe and proper return of same upon request. If materials cannot be returned in the same condition as received (except for reasonable wear and tear), I am/we are responsible for the value thereof.

The Edmonton Sabers Marching Band is granted permission, while the child is in their care, to administer first aid or take the child to a doctor or hospital for any emergency treatment deemed necessary.

All rules and regulations as set forth by the Edmonton Sabers Marching Band are agreed to and I/we will ensure that the child adheres to same.

Personal information is collected in accordance with FOIP requirements and is used strictly for communication and safety purposes among the Band members, staff and families. I/We understand it is my/our responsibility to inform the Band of any changes to such information.

I/We have read and agree to the Conditions above.

\_\_\_\_\_  
Parent(s)/Guardian(s) signature(s)

\_\_\_\_\_  
printed name(s)

Date: \_\_\_\_\_

2010/08/01