

Barefoot

National Barefoot Team Personal Information Form

Please complete this form, and return via email, fax or mail to the contact information below.

Name:		DOB	/ /	
DD/MM/YYYY				
Team(s):	Open <input type="checkbox"/>	Senior <input type="checkbox"/>	Junior <input type="checkbox"/>	
PERMANENT ADDRESS				
Address			City:	
Postal Code:		Country:		
Home phone number:		Cell phone number:		
FAX #		E-mail		
SECONDARY ADDRESS				
Dates at secondary address:		From:	To:	
Address		City:		Home phone number:
Postal Code:		Country:		
PERSONAL COACH INFORMATION				
Name:			Affiliation (school/club):	
City:			Country:	
Landline phone:		Cell Phone:		
Fax number:			Email:	
PROVINCIAL HEALTH CARE INFORMATION				
Provincial Health Card Number:			Province of medical coverage:	
If no provincial health care, please note insurance information:				

**** Privacy Policy:** WSWC is committed to protecting the privacy of people whose personal information is held by WSWC and its members through responsible information management practices. Any personal information provided to WSWC is collected, used and disclosed in accordance with the *Personal Information Protection and Electronic Documents Act*.

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UNIFORMS

Please complete the uniform table below and indicate your preferred size.

UNIFORMS					
	XS	S	M	L	XL
T-shirt					
Golf Shirt					
Sweatshirt					
Shorts					
Track suit					
Shoe size					

BIOGRAPHY

Everyone is asked to provide biographical information for WSWC website and other media purposes. Athletes who already have a biography posted or have had one in the previous 3 years will be sent a bio from WSWC to update. New athletes will be asked to complete the blank bio form attached.