

Sergei's Sabre Club

FENCING & INSTRUCTION



12223 – 66 Street, Edmonton, AB T5B 1K1

Phone: (780) 966 6107 or (780) 483 7997

Email: info@sabreclub.ca

<http://www.sabreclub.ca>

Fencer's Information:

Date (MM/DD/YY) _____ Years of Fencing Experience _____

Last Name _____ First Name _____

Street _____ City _____ Postal Code _____

Home Phone _____ Work Phone _____ Email _____
(if registering a child, must be parent's email)

Birth Date (MM/DD/YY) _____ Age _____ Gender (circle) Male / Female

Registering for _____ Term or Month _____

All members must have a valid AFA membership.

Please register online at <http://www.fencing.ab.ca/afa-join.asp>

Does the fencer have his/her own equipment? Please Circle:

Yes No

Please circle if you have ever been diagnosed or are currently taking medication for:

Asthma Respiratory Disorder Heart Disease High Blood Pressure

Hemophilia Blood Disorders Diabetic ADHD/ADD

I, the undersigned, release Sergei's Sabre Club, its employees, and membership from any legal recourse or remuneration in the event of injury or death directly or indirectly related to the facility, employees or membership. I, the undersigned, also consent and agree to follow the safety rules and regulations set out by Sergei's Sabre Club and its employees at all times while in the facility or while representing the club abroad. I further agree to abide by the rules and regulations of the Alberta Fencing Association and the Canadian Fencing Federation as they apply to me.

Signature _____ Date _____
(If under the age of 18, the signature must be of parent or guardian)

Printed Name of Parent/Guardian _____

How did you hear about Sergei's Sabre Club? _____