

PLAYER REGISTRATION

DATE

DATE OF BIRTH

LEGAL NAME

EMAIL

ADDRESS

CITY

Prov

**POSTAL
CODE**

TELEPHONE (RES)

(CELL)

1. By signing this application, I realize that I am READY TO PLAY and will represent myself in a positive manner.
2. I am of legal age in the Province in which I am playing.
3. I accept and will abide by all tournament rules and the code of conduct.
4. Any abuse of the program or failure to follow program rules may result in the termination of membership.
5. I agree to abide by Canadian law and will do no wagering, betting and/or side-betting at the produced games.
6. I understand that NO money shall ever be on the table at a produced event.
7. I understand that all chips and tokens used in the games have no monetary value.
8. I understand that I will receive no direct/indirect financial gain as a result of playing.
9. Membership is offered at the discretion of the Tournament Director and may deny membership to any applicant.
10. The Tournament Director retains the sole right to interpret and apply the rules.
11. Decisions of the Tournament Director about any aspect of the program will be final

I have read this release, and I understand its contents and intend to be bound hereby.

SIGNATURE

PRINT NAME
