

# MARCH FOR LIFE 2010, OTTAWA

May 13/14 Trip arranged by St. Catharines Right to Life Association

Seats are limited so send in your signed registration form and payment ASAP to reserve your spot.

## REGISTRATION

Please print clearly

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: (please include postal code) \_\_\_\_\_

SCHOOL/GROUP : \_\_\_\_\_ GRADE: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

STUDENT \_\_\_\_\_ \$75 - includes coach, accommodation/breakfast, Banquet, Youth Conference  
(lunch is provided)

CHAPERONE \_\_\_\_\_ Same as student.

Please complete permission form below, if appropriate.  
Make cheques payable to St. Catharines Right to Life Assoc.

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### PERMISSION/RELEASE FORM for young person under 18 unaccompanied by parent

I, \_\_\_\_\_, give my child, \_\_\_\_\_  
(parent or guardian)

permission to participate in the March for Life 2010 and Conference trip on May 13/14, 2010. I hereby release St. Catharines Right to Life Association and its Directors from any liability, claims or damages which may arise from the trip.

SIGNED: \_\_\_\_\_ DATED: \_\_\_\_\_

PARTICIPANT'S AGE: \_\_\_\_\_ HEALTH CARD # \_\_\_\_\_

Please mail completed form and payment to:  
**St. Catharines Right to Life Association, 3 King Street, Suite 2, St. Catharines L2R 3G8**

Phone: 905-684-7505 Fax: 905-684-0256 E-Mail: [righttolife@becon.org](mailto:righttolife@becon.org)