

MARCH FOR LIFE 2011, OTTAWA

May 12/13 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.**

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 2011 and Conference trip on May 12/13, 2011. 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 # _____

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