

Athletes Last Name	First Name:	
Male □ Female □	Birthdate (mm/dd/yy):	
Address:	Postal Code:	
Parent/Guardian Email:	Phone:	
Mothers Name:	Phone (other than above): _	
Fathers Name:	Phone (other than above): _	
Legal Guardian:	Phone:	
Child lives with: Mother \Box Father \Box Bo	th Parents Other	
I give permission for the Transcona Nationals	Cootball Club to post action pictures of my chi	ld on their website and social media pages.
Yes No Signature:		
Football Registration		
Terminator (Cruncher) \Box Atom \Box Pee Wee \Box	Minor Bantam □ Bantam □ Midget □ Majo	r 🗆
Is this your child's first year playing tackle footb	all? Yes □ No □	
Cheer Athletic Registration		
Mini (Gr. 2-3) ☐ Youth (Gr. 4-6) ☐ Junior (Gr	7-9)	
Volunteer Information		
Visit: www.transconanationals.com click on	volunteers to sign up on volunteer spot.	
Are you interested in volunteering as a: Coa		
Volunteer Fee Paid at time of Registration?	-	
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Transcona Nationals Program Fees:		
Football Registration Fee		
Cheer Registration Fee		
Late Fee (Charged after initial		
Registration)		
Volunteer Deposit (Per Family)	\$100.00	
Fundraising Package (Per Family)	\$150.00	
Total		

Date	Amount	Cheque/Cash/Credit
Equip. Deposit	\$100.00	Received

TN Club Use Only

Amount Eligible for Fitness Tax Credit:

Authorized Club Signature/Date: