



**2007-2008 Johnson Cup**  
Lakeshore Curling Club - February 29-March 2, 2008

[Please Print]

\_\_\_\_\_ *CURLING CLUB*

\_\_\_\_\_ *CONTACT*

\_\_\_\_\_ *ADDRESS*

\_\_\_\_\_ *CITY*

\_\_\_\_\_ *POSTAL CODE*

\_\_\_\_\_ *TELEPHONE (HOME)*

\_\_\_\_\_ *(WORK)*

\_\_\_\_\_ *EMAIL*

**NOTES**

1. This entry form must be completed in full or it will not be accepted.
2. Entries and fees must be received by the entry deadline at the above address.
3. Entry fees will not be returned after the entry deadline.
4. All competitors must be affiliated with NSCA.
5. Coach's name (if applicable) and NCCP level must appear on this entry. All coaches are subject to the NSCA Volunteer Screening Policy (available on NSCA Website).
6. It is your responsibility to know the Rules for Championships, the CCA Rules for Curling, and the NSCA Code of Conduct Policy (on NSCA Website & available at your club).

**TEAM ROSTER ATHLETE CERTIFICATION**

Please fill in team lineup and have each member apply their signature and home club to certify they meet criteria below.

1. Must be 21 years of age, or older, as of December 31st of the year
2. NSCA membership fees have been paid for the 2007-2008 season by my home club.

\_\_\_\_\_ *SKIP*

\_\_\_\_\_ *CLUB*

\_\_\_\_\_ *SIGNATURE*

\_\_\_\_\_ *THIRD*

\_\_\_\_\_ *CLUB*

\_\_\_\_\_ *SIGNATURE*

\_\_\_\_\_ *SECOND*

\_\_\_\_\_ *CLUB*

\_\_\_\_\_ *SIGNATURE*

\_\_\_\_\_ *LEAD*

\_\_\_\_\_ *CLUB*

\_\_\_\_\_ *SIGNATURE*

\_\_\_\_\_ *FIFTH*

\_\_\_\_\_ *CLUB*

\_\_\_\_\_ *SIGNATURE*

**NSCA Entry Fee: \$ 140.00**

**Return Entries to:**

Nova Scotia Curling Association  
5516 Spring Garden Rd, 4th Floor  
Halifax, NS B3J 1G6

**COACH'S INFORMATION (if applicable)**

The Nova Scotia Curling Association has instituted a Volunteer Screening Policy. The Policy can be found on our website under the Organization Tab. As part of the process we require proof that all coaches have completed the appropriate checks. Please have you Curling Club indicate that you have cleared the Criminal Records Check and the Child Abuse Registry Check. (We only require this information once per season.)

\_\_\_\_\_ *COACH*

\_\_\_\_\_ *SIGNATURE*

\_\_\_\_\_ *NCCP CERTIFICATION*

\_\_\_\_\_ *NCCP PASSPORT #*

I confirm on behalf of the \_\_\_\_\_ curling club that this team may use our name to enter this provincial championship or playdown. Otherwise your team will be listed as NSCA.

\_\_\_\_\_ *Club Officer*

**DEADLINE FOR ENTRIES: 4:00PM - Thursday, February 7, 2008**