



Thistle St. Andrews Curling Club

Membership Registration Form

Name _____

Street Address _____

City _____ Postal Code _____

Home Phone _____ Work Phone _____

Email Address _____

Date of Birth _____

Occupation _____ Curling Experience (years) _____

Membership Category

- Full
- New Member
(or not a TSA member for past 3 yrs)
- One Night
- Unlimited Daytime
- Full Under 30
- Student
- Junior
- Little Rocks
- Associate Member
- Practice

League Preference

- Monday Night (Mixed)
- Tuesday Night (Competitive)
- Wednesday Night (Mixed)
- Thursday Night (Men's)
- Friday Night (Aliant)
- Sunday Night (Commercial)

- Senior Men's (Monday & Wednesday)
- Day Ladies (Tuesday & Thursday)
- Juniors
- Little Rocks

Lockers Full Size Half Size

Are you interested volunteering?

- House Committee Ice Committee Junior Program
- Little Rocks Program Finance Bartending Fundraising Other

Welcome to the Club.