

REGISTRATION FORM

Please complete this form accurately and clearly.

CUSTOMER INFORMATION

Full Name: _____

CONTACT DETAILS

Phone Number: _____

Email Address: _____

Address: _____

REGISTRATION DETAILS

Registration Date: _____

Registration Type: _____

SEASON TYPE

☐

Full CSA \$1000

☐

Single season CSA \$388

DECLARATION

I confirm that the information provided is true and correct to the best of my knowledge. _____

Signature: _____ Date: _____

Footer Notes

- Please ensure all details are completed before submission.
- Incomplete forms may delay the registration process.