

Contact Information Form

I have reviewed Great Lakes Sword Club's (hereafter GLSC) request for dissemination of my contact information to other members. Contact information will not be sold, or shared, with other companies or posted to the GLSC website. Information may be used in GLSC emails to members and/or posted at GLSC. I realize I can change my decision to share information with other members by notifying GLSC in writing at any time.

General Information (always shared)

Name: _____

Age group fenced: 12 and under 14 and under Cadet Junior Senior Veteran

Weapon(s) fenced: Foil Epee Sabre

Share? <input type="checkbox"/>	Cell Phone	(_____) _____ - _____
Share? <input type="checkbox"/>	Home Phone	(_____) _____ - _____
Share? <input type="checkbox"/>	Email (required)	
Share? <input type="checkbox"/>	Address	
Share? <input type="checkbox"/>	Other	

Emergency Contact Name (required): _____

Emergency Contact Phone Number (required): (_____) _____ - _____

If I should allow access to my information by other members, and then subsequently decide to withdraw that permission, I hold GLSC harmless for any problems perceived to be caused by dissemination of my information made with my previous written permission. Parents and youth members must both verify release of information in the case of minor age members.

Signature of Fencer Date Print Name

Signature of Parent or Guardian (for Members under age 18) Date Print Name

8/1/2014