



2025 REGISTRATION FORM

First Nation / Tribe:	
Address:	
Team Contact:	
Email:	

Division - check one				
Senior Men's (40+) 	Senior Men's (50+) 	Senior Ladies (50+) 	Super Senior Men's (60+) 	Super Master Men's (70+)
6 players + alternate(s)	6 Players + alternate(s)	4 players + alternate(s)	4 Players + alternate(s)	4 Players + alternate(s)
• \$3,200.00 Registration Fee	\$3,200.00 Registration Fee	• \$2,400.00 Registration Fee	• \$2,400.00 Registration Fee	\$2,400.00 Registration Fee

Please enter the player in their playing position

Name: (please print clearly)		Treaty Number:
Capt :		
1.		
2.		
3.		

4.		
5.		
6.		
7.		

All players "may" be asked to produce Treaty and/or Tribal cards as proof if registration is contested - please bring card

<p>Make Certified cheque payable to:</p> <p>First Nations Senior Cup</p> <p>Or:</p> <p>Alexander Forest Services</p> <p>E -Transfers Accepted - send to:</p> <p>firstnationsseniorecup24@gmail.com</p>	<p>Registration Deadline: September 1, 2025</p> <p>Once the FNSC has processed any tournament Registration fees there will be NO REFUNDS.</p>
<p style="text-align: center; background-color: yellow;">Must be completed by First Nation Membership office only</p> <p>By signing this form I confirm that the above noted individuals are members of the above noted First Nation</p> <p>First Nation: _____</p> <p>Membership Clerk Name: _____</p> <p>Phone: _____</p> <p>Signature: _____</p> <p>Date _____</p>	

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In case of emergency during the First Nations Senior Cup Tournament, I, the captain and we the team participants authorize a qualified medical doctor/professional to take all essential steps in the care of the above-mentioned FNSC tournament participant.

I, the captain and we, the team participants further agree that all pictures including multimedia, interviews taken of myself by the FNSC or any of its agents may be used in any or all publicity

releases and become the property of the First Nations Senior Cup committee.

By signing this registration form, I, the captain and we, the team participants, agree to abide by any rules and regulations of the First Nations Senior Cup, we further understand that by not following Tournament rules we may be subject to disqualification from the FNSC event.

I, the captain and we the team participant do acknowledge that fees are non-refundable for failure to show up for the event or with all team players.

I, the captain and we, the team participants accepting my own responsibility, hereby release the host facility, the FNSC Host Organizing Committee members, the Alexander First Nation and its sponsors from any and all liability including loss, injury or fatal accident as a participant in the tournament. (This declaration must be signed by the First Nation/ Tribal membership office and the team captain or the registration is deemed as VOID).

Team Captain Signature: _____

Date: _____

Email forms to: firstnationsseniorecup24@gmail.com

Contact information:

Committee Member: Laverne Arcand 780-915-5903

Committee Member: Joyce Cardinal-Arcand 780-224-1910

Wolf Creek Golf Resort: Jim Boomer 1(866)-783-6065

Administration Use only

Fees paid: cash upon registering

_____ Cash

_____ Cheque

_____ Etransfer

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Registration Fees paid in

full:

Yes _____

No _____

Balance owing:

_____ due in