**FORM C4 – Athlete Sport Registration / Floor Hockey Team**

(Please PRINT in ink using block letters or TYPE)

This Registration is for (CHECK ONLY ONE BOX BELOW):

[ ]  Athlete

[ ]  Alternate (Substitute/Reserve) Athlete

[ ]  Unified Partner

[ ]  Alternate (Substitute/Reserve) Unified Partner

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Delegation Name SO Region

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Family Name First Name MI

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Gender  |  | Male |  | Female |

|  |  |  |  |  |  |  |  |  |  |  |  |
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| Date of Birth  |  |  |  |  |  |  |  |  |  |  |  |

 DD MM Year

***You must check the event Athletes wishes to enter***

|  |  |  |
| --- | --- | --- |
| Event Code | Check | Event Name |
| F | H | T | E | A | M |  |  |  |  | Team Competition |
| F | H | T | E | A | M | U |  |  |  | Unified Sports Team Competition  |

***Floor Hockey registration also requires completion of Form D***