

Halifax Wavecutters Aquatic Club

Youth Developmental Water Polo 11&U

Location: Centennial Pool

Start Date: November 8th, 2026

End Date: June 6th, 2027

Registration Information

Name:		
Address:		
City:	Postal Code:	
Sex:	Birth date: (dd/mm/yy):	
Allergies/Conditions:		
Medications:		
Health Card #:		
Name of Parents or Guardians:		
Telephone #:	Cell #:	Work #:
Emergency Contact (If different from above):		
E-mail Address:		

Please circle your choice

Schedule	New members/sibling	Returning members/sibling
Sunday 12:30- 1:30pm	Once per week \$420/410	\$410/400

Parent's signature _____ Date _____
