



WRYM'S Rough Night Out

FEB 16 – FEB 17
9:00PM – 6:00AM

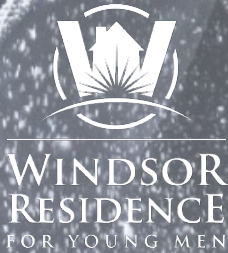
at the

Windsor Residence for Young Men

1505 Langlois Avenue | Windsor, ON N8X 4M3

or a location of your choice

Registration Form



Name		Company	
Address			
City	Province	Postal Code	
Email		Phone	

A. I am registering as: Individually Member of team _____

B. My location will be: At WRYM Other (please specify) _____

C. I plan to attend the WRYM's barbeque at midnight: Yes No

- Please indicate which of the following you prefer:

Hamburger – Quantity _____

Hotdog – Quantity _____

Coffee – Quantity _____

Hot Chocolate – Quantity _____

- Indicate here if you have any dietary restrictions _____

D. My emergency contact is _____ Phone _____

To complete your registration, please ensure you have completed both the Registration Form and Participation Waiver and emailed both to Sue at events@wrym.ca. WRYM **must** receive both forms completed and signed before your participation in the Rough Night Out.

Signature _____ Date _____

First name _____ Last name _____

If you require more information, please email Sue at events@wrym.ca or visit our website at www.wrym.ca