

22-23 REGISTRATION FORM

ONE FORM PER PARTICIPANT

Name:		Date of Birth:
Current address:		
City:	State:	ZIP Code:
Emergency Contact Number:		Contact Name:
Email Address:		

SENIOR WORKSHOP PROGRAM

8:30-10am 1/2, 1/9, 1/23, 1/30, 2/6, 2/13, 2/27 & 3/6 **SKIER / SNOWBOARDER** Years of Experience:

SKIING/SNOWBOARDING ABILITY: Please Mark

BEGINNER First time	NOVICE can stop and turn on Success	PROFICIENT comfortable Green runs	INTERMEDIATE comfortable Blue runs	ADVANCED comfortable on all slopes, Working toward off-piste
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Goals:

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PAYMENT/FEES*

<u>PROGRAM NAME</u>	<u>Price \$195</u>	<u>Total</u>
Sr. Workshop	\$195	\$

FOR OFFICE USE ONLY

Guarantor:		Amount:	
PAYMENT TYPE/CC :		CCV:	EXP: Zip:
DATE:	FORM/PAYMENT TAKEN BY:		
Demo Ski:	Date Used:		

***Programs are non-transferable and there will be no refunds or make up dates for missed lessons**

This program meets 8 times throughout the season. The goal of this program is to improve skiing/riding in all conditions and terrain throughout the season.