

APPLICATION. For the 2010 MAT-SU SKI AND SNOWBOARD PROGRAM

NAME: _____
ADDRESS: _____
CITY, STATE, ZIP _____
SCHOOL ATTENDED: _____
HOME PHONE: _____
EMERGENCY PHONE (for ski Saturdays): _____
EMAIL ADDRESS (please print): _____
PARENTS EMAIL ADDRESS: _____
BIRTHDATE: _____ AGE: _____

CIRCLE ONE CHOICE ON EACH OF THE FIRST FIVE LINES BELOW:

1. WHICH SCHEDULE DO YOU CHOOSE? SCHEDULE# 1 SCHEDULE#2
2. WHICH BUS DO YOU CHOOSE? PALMER WASILLA
3. EQUIPMENT TYPE: SKI SNOWBOARD
4. SKILL LEVEL: NONE BEGINNER INTERMEDIATE ADVANCED
5. DO YOU WISH TO RENT EQUIPMENT? YES NO
6. IF RENTING, INDICATE: HEIGHT _____, WEIGHT _____, SHOE SIZE _____

CAREFULLY READ, COMPLETE, SIGN AND DATE IN FIVE PLACES BELOW:

Discipline action: Failure to follow rules will result in both the parent and the skier/boarder being informed that the skier/boarder will not be allowed to attend the next scheduled trip. Should another problem occur that skier/boarder will be dropped from the program. <u>There will be no refund of money to anyone dropped for disciplinary reasons.</u>	
Parent Signature _____	Date _____
Skier/boarder Signature _____	Date _____
I understand that my son/daughter/ward will not be able to participate in the Mat-Su Ski/Snowboard Program if they do not have health/accident insurance coverage. I have accident and health insurance for this participant.	
Insured by: _____	Policy#: _____
Parent Signature _____	Date _____
<u>RELEASE OF LIABILITY</u> IMPORTANT DOCUMENT PLEASE READ CAREFULLY	
The undersigned, as parent or guardian of _____ (student's name) has granted permission to my son/daughter/ward to participate in the SKI/SNOWBOARD PROGRAM sponsored by Wasilla Middle School. In consideration of the above named student being permitted to participate in the Mat-Su Ski/Board Program, I hereby release, waive, discharge and agree to hold harmless the Matanuska-Susitna Borough School District, its agents, officers, employees and volunteers from all liability to me, my spouse, or my son/daughter/ward for any and all loss or damage or claim for loss or damage for acts or omissions arising out of or connected in any way with participation in the Mat-Su Ski/Board Program. This release and waiver of liability applies to, but is not limited to, bodily injury, property damage and death due to injury.	
The undersigned expressly agrees that this waiver is intended to be as broad and inclusive as permitted by the laws of the State of Alaska and that if any portion of this agreement is held to be invalid the balance shall, notwithstanding that fact, continue to be in full force and effect. Neither my son/daughter/ward nor I have been compelled to participate in the activity described in this release. We both understand that no penalty or prejudice would be suffered by the above named student if he/she were not permitted to participate in this activity as a result of a refusal to sign this release. I understand that the District does not provide participants with accident insurance. School insurance is available to purchase, if necessary. I understand that accidents may occur. If first aid is required, it may be provided by program staff prior to the arrival of emergency personnel.	
Parent/Guardian Signature _____	Date _____
I have read this release carefully and agree with the decision of my parent/guardian to sign the release on my behalf.	
Student Signature _____	Date _____