



www.mountainviewmidland.com

YOUTH SKI INSTRUCTION PROGRAM REGISTRATION "JACK RABBITS" and "BUNNY RABBITS"

Registration Fee:

Bunny Rabbits (SK or 5 years old) \$80.00 Season's pass holders \$40.00
Jack Rabbits – Levels 1-5 (age 6 – 12) \$100.00 Season's pass holders \$60.00

After December 15, 2009 a late fee of \$20.00 will be charged.

Rental sizing and last day to register January 2, 2010 at Mountainview Ski Area.
Please make cheques payable to Midland Ski Club.

Program runs Saturdays January 9 - February 20, 2010, 2:00 – 4:00 pm.

Arrive by 1:30 pm to ensure children are set up on skis and in groups correctly.

Jack Rabbit Festival on February 27, 2010: 2:00 – 4:00pm with awards to follow.

Please fill in all spaces.

Participant Name: _____ Age: _____ Fee: _____
Level last completed: _____

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Level last completed: _____

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Level last completed: _____

Address: _____ Postal Code: _____

Phone: _____ Email: _____

Parent: _____ Phone: _____

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New to the program this year is **LUG a MUG** for hot chocolate which will help with the environmental impact from the hot chocolate/drink cups.

Parents are asked to contribute snack to the program by helping to set up and serve snack on the day you have signed up for. There will be a sign up sheet on the first day of instruction. Please sign up for one snack per child registered. Thank you for your assistance in providing healthy nut-free snacks.

In addition, parents are encouraged to volunteer on the snow on a rotating basis, even if you do not ski. This will help your child be comfortable with instructors and helps the program run more smoothly. Any questions may be directed to Pamela at 549-9957

Parents please indicate if your child or children have any allergies or medical needs, learning disabilities or challenges that we may need to know about and let us know what works best to address these needs compassionately and effectively.

In consideration of your accepting this application, I, for myself, my heirs and assigns do hereby release Midland Ski Club, Mountain View Ski Area, volunteers, organizers, sponsors, employees or property owners from any claim whatsoever arising from my participation in the program, or my use of the facilities and surrounding trails.

Signature of Parent _____ **Date** _____

Send Form and Payment to:
Midland Ski Club
c/o Pamela Holt,
46 Whippoorwill Drive
Perkinsfield ON
L0L 2J0