



Nordic Wolves & Pups Registration

Please submit completed forms by 1/1/20

Minocqua Winter Park

PO Box 1090 PMB 234

Minocqua, WI 54548

First Name: _____ Last Name: _____ Grade/School _____ Skiing Ability: _____
Never skied Beginner Intermediate Advanced

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Are there any special medical conditions or dietary restrictions that we should know about?

Do you have any specific goals for your child(ren)?

Parent / Guardian Info

Name(s): _____

Address: _____ City: _____ State: _____ Zip: _____ Email(s): _____
Home Phone: _____

Work Phone: _____

Cell Phone(s): _____

May we text you with program updates/cancellations? YES / NO Are you interested in carpooling? YES / NO

Athlete's Release: Acknowledgement and Assumption of Risk Release: I know that skiing is an action sport carrying significant risk of serious personal injury, death or property damage. I also know that there are natural, mechanical and environmental conditions and risks which independently or in combination with my activities may cause property damage, or severe or even fatal injuries to me or others. I agree that I alone am responsible for: (a) my safety while participating in competitive events and, (b) providing, utilizing and maintaining that equipment necessary for the safe enjoyment of my participation in such events and specifically acknowledge that the following persons or entities including Minocqua Winter Park employees and volunteers, the promoters, the sponsors, the organizers, the officials and any agent, representative, officer, director, employee, member or affiliate, of any person or entity named above are not responsible for my safety. I specifically RELEASE and DISCHARGE, in advance, those parties from any and all liability whether known or unknown, even that liability which may arise out of negligence or carelessness on the part of persons and entities identified above. I further agree to forever HOLD HARMLESS and INDEMNIFY all persons and entities identified above, generally and specifically, from any and all liability for death, personal injury or property damage, resulting in any way from my participating in competitive events. I currently have, and I agree to maintain throughout the time that I train and compete, valid and sufficient medical and accident insurance. I understand that it is my sole responsibility and release all persons and entities identified above from providing this coverage for me. I agree that I will accept and abide by any rules or regulations imposed by the organizers of any particular competition. This Acknowledgement and Assumption of Risk and Release shall be binding upon my heirs and assigns. **Photography Release:** I hereby grant absolute right and permission to the Lakeland Ski Touring Foundation to use photographic portraits of me for illustration, promotion and advertising purposes.

*** I have read and agree to the terms of the Athletes Acknowledgment and Assumption of Risk Release? (parent/guardian must sign for those under 18)

Parent/Guardian Signature: _____ **Date:** _____



Nordic Wolves & Pups

NEW

ALL YOUTH SKI RENTAL COVERED BY GENEROUS DONOR FOR 2020

Minocqua Winter Park & Nordic Center occasionally receives charitable grants to its Trail Fund to provide a limited amount of scholarships for the Nordic Wolves & Pups youth skier development program (as well as other community skier development initiatives). This additional funding enables us to reduce or waive the costs of instruction and equipment rental for area youth.

Skis, boots, and poles are available at a discounted rental fee of \$5 per session from the on-site Minocqua Winter Park Ski Shop. The Ski Shop also has a trade-up program for growing youth skiers, and equipment is also available from other area stores and ski swaps.

If you are interested in participating our Nordic Wolves & Pups program but lack the funds to do so, please fill out the application below to be considered for a grant. Since a limited amount of funds are available we will prioritize the recruitment of a larger group of youth over the full-funding of a few individuals. Funding is guaranteed this season.

First Name: _____ Last Name: _____

- What grade is your child in? _____ / School? _____
- How much funding are you requesting? Instruction costs (Up to \$60): \$ _____

Equipment rental (Up to \$80): \$ 2020 NO FEE

- If Minocqua Winter Park is unable to cover *your entire* funding request, will you still be able to participate in the program? Yes / No _____

Will you be able to commit to attending all 16 sessions: Yes / No

In your child's words, please explain why she or he wants to learn to ski:

Applications must be postmarked to Minocqua Winter Park by: 1/1/20

Mail Completed Form To:

Minocqua Winter Park

PO Box 1090 PMB 234

Minocqua, WI 54548