

The Snow Sports Academy registration form 2017**Personal information**

Name:	Age: (as of July 23/7/17)
Discipline: Skiing <input type="checkbox"/> Snowboarding <input type="checkbox"/>	
Academy Options: 10 Sunday sessions (tick one)	
<ul style="list-style-type: none"> • Freeride: Full day (9am-3pm) <input type="checkbox"/> Half day (9am-12pm) <input type="checkbox"/> • Race: Full day (9am-3pm) <input type="checkbox"/> • Freestyle: Full day (9am-3pm) <input type="checkbox"/> 	
Skiing or Snowboarding level (please refer to the ability level chart and tick the level that best describes your ability):	
L1 <input type="checkbox"/> L2 <input type="checkbox"/> L3 <input type="checkbox"/> L4 <input type="checkbox"/> L5 <input type="checkbox"/>	
Email:	Cell #:
I give permission for the above named person to leave unaccompanied at the end of any given day of the 'Snow Sports Academy' without being released to either myself or an appointed adult.	
Yes <input type="checkbox"/> No <input type="checkbox"/>	
Relevant medical information:	
Emergency contact person:	
Emergency contact phone number:	
Safety: Helmets are required due to the racing & freestyle components of these programmes. It is strongly recommended that all snowboarders wear wrist guards when training. (Helmets and wrist guards are available for purchase from our retail shop)	

Apparel

Branded 'Rainbow Snow Sports Academy' hoodie - Size (unisex)
Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> XL <input type="checkbox"/>
Branded 'Rainbow Snow Sports Academy' beanie – One size fits all
Yes <input type="checkbox"/> No <input type="checkbox"/>

Payment Details (payment is required prior the start of this programme)

Full day \$490 <input type="checkbox"/>	
Half day \$360 <input type="checkbox"/>	
Are you a Club Member? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Payment Method: Direct credit <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> Cheque <input type="checkbox"/>	
Credit Card Number: _____	
Credit Card Expiry Date: (mm/yy) ____/____	CVC:
Name on card:	Signature:

Please complete form, then either: Scan and email to or post to Rainbow Sports Club Inc, PO Box 76, St Arnaud 7053.

- Cheques payable to 'Rainbow Sports Club Inc'
- Direct credit: (ANZ) -- 01 0598 0078864 00 – Payee reference format: "**Surname/Academy**"

I _____ (parent/caregiver) understand that _____ (participant's name) wishes to take part in the Snow Sports Academy seasonal programme. There is an element of risk associated with snow sports, I am aware of this and I'm happy for my child to participate in the programme. I will not hold the company/instructor responsible for any accident or injury that may be sustained during training sessions.

Signed: _____ Date: ____/____/2017