

MWFC Registration Form

(Please Print Clearly)

Athlete Name: _____

Parents Name(s): _____

Email address #1: _____

Email address #2: _____

Birthdate: Day _____ Month _____ Year _____

Programs:

Please Circle Day

Jumps & Bumps: _____ Saturday Sunday Both

Freestylers: _____ Saturday Sunday Both

Competitive: _____ Saturday & Sunday 2-day Program

WAIVER (Minor Participant)

I/We _____, request that my/our son/daughter, _____ be allowed to participate in the events, activities and games sponsored by the Canadian Freestyle Ski Association, BC Freestyle Ski Association and the Mount Washington Freestyle Club. In consideration of my child named above being registered in the Canadian Freestyle Ski Association and allowed to participate in, I/we and our heirs, administrators and assigns, hereby forever release, discharge and hold harmless the Canadian Freestyle Ski Association, BC Freestyle Ski Association, Mount Washington Alpine Resort and Mount Washington Freestyle Club, its directors, officers, employees, representatives and agents from any liability for any injury, loss or damage sustained by the child named above, however caused, arising out of or in connection with the said child participation in the said events and activities. IN WITNESS WHEREOF, I/we sign this waiver and release on this _____ day of _____, 20__.

Signature of Parent/Guardian

Print Name of Parent/Guardian

Please note: A Mount Washington lift ticket or season's pass is required and is not included in the fees.

<p><i>Office Use:</i> CFSA Membership Confirmed: email / paper copy / Registration No. _____ Athlete Emergency Information Form complete: _____ Club Membership Paid by: cheque / cash Total Amount: \$ _____ Registrar Initials: _____</p>
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