



Martock Ski Race Club Registration Form 2011-2012

Nancy Greene, K1, K2, J1, J2, Masters, University, Freestyle

Please complete all sections. Waiver form must be signed and witnessed to be considered registered. MSRC reserves the right to decline applications. Space is limited. Registration is on a "first come, first served" basis, with priority given to returning athletes until October 31, 2011.

Parent(s)/Guardian(s): _____

Address: _____

Phone: Home _____ Work _____ Cell: _____

Parent email: _____ Athlete email: _____

Emergency Contact (other than Parent/Guardian):

Name: _____ Relation to Athlete: _____ Phone: _____

Athlete's Name (LAST, First)	NS Health Card #	Date of Birth (dd/mm/yyyy)	Program (see below)	Fee
Total:				

Programs and Fees See Information Sheet for description of Programs and K1PT Options		
Nancy Greene/Snow Stars: Regular Fees: \$375.00 (includes Christmas Camp) Christmas Camp only: \$100.00 (credited towards regular fees if athlete joins)		
K1PT: \$600	Options: Dryland (\$100), Wed evening (\$100), Christmas Camp(\$100)	
K1FT: \$895	J1: \$895	Freestyle: \$385
K2: \$895	J2: \$895	Master's : \$275
	JPT: \$550	University: \$325

Method of Payment:	
<input type="checkbox"/> Cheque <input type="checkbox"/> Cash	Credit Card Payment: If you wish to pay by credit card please register using the online registration system.

Nancy Greene Parents

A parent/guardian or other adult who can be responsible for your child MUST be in attendance at Ski Martock at all times during program hours, and must be in the lodge to supervise your child during lunch breaks. Coaches do not supervise skiers during lunch break. Parents must be available in the event that a child is unable to participate in the program for the remainder of the day (illness, emergencies, etc.) Coaches are not able to look after individual children in the lodge for any length of time, although a coach will stay with the child until the adult responsible for the child is located.

Parent/Guardian Signature: _____

For Office Use only:

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Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement
BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

Please read carefully before signing.

Name of Participant _____

Address _____

Date of Birth _____

To: *Nova Ski Ltd., o/a Ski Martock, Martock Ski Race Club, Alpine Ski Nova Scotia, Alpine Canada, Freestyle Ski Nova Scotia, and Canadian Freestyle Ski Association* and their directors, officers, employees, instructors, agents, representatives, volunteers, independent contractors, subcontractors, sponsors, successors and assigns (**hereinafter collectively referred to as the "Releasees"**).

I am aware that THE RELEASEES and their Alpine and Freestyle Ski Programs have in addition to the usual dangers and risks inherent in the sport of alpine and freestyle skiing, certain additional dangers and risks including, but not limited to, the danger and risk of collision with natural and man-made objects with other skiers and spectators, and I freely accept and fully assume all such dangers and risks and the possibility of personal injury, death, property damage or loss resulting therefrom.

In consideration of the releasees permitting my participation in "the Program" and permitting my use of the lifts, ski runs, trails, terrain parks, race courses, restaurants, day lodge and other ski area facilities (hereinafter "the facilities"), and for other good and valuable consideration, the receipt and sufficiency of which is acknowledged, I hereby agree as follows:

TO WAIVE ANY AND ALL CLAIMS that I may have against the Releasees, the Program, the Program sponsors, and their directors, officers, employees, agents, and representatives, and any volunteers in any way associated with the Program, (all of whom are hereinafter collectively known as "the Releasees").

Initial Here

TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY for any loss, damage, injury or expenses that I may suffer as a result of my participation in the Program due to any cause whatsoever, INCLUDING, BUT NOT LIMITED TO, NEGLIGENCE, BREACH OF CONTRACT, BREACH OF STATUTORY DUTY OF CARE OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE OCCUPIERS LIABILITY ACT, OR ON THE PART OF THE RELEASEES, AND ALSO INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO TAKE REASONABLE STEPS TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGES AND HAZARDS REFERRED TO ABOVE.

TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability from property damage or personal injury to any third party, resulting from my participation in the Program or use of the Ski Area and its facilities; AND THAT, this Release of Liability shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns in the event of my death.

I am the full age of 19 years and I have read and understood this Release of Liability prior to signing it, and I am aware that by signing this Release of Liability I am waiving certain legal rights which I, or my heirs, next of kin, executors, administrators and assigns may have against the releasees.

Signed this _____ day of _____

Witness

Signature of Participant

Signature of Parent or Legal Guardian

THIS AGREEMENT MUST BE COMPLETED IN FULL, DATED AND SIGNED BY THE PARTICIPANT (AND PARENT OR LEGAL GUARDIAN IF NECESSARY) AND DULY WITNESSED, BEFORE THE PARTICIPANT WILL BE PERMITTED IN THE PROGRAMS.



ALPINE CANADA ALPIN
MEMBERSHIP REGISTRATION FORM / FICHE D'INSCRIPTION DES MEMBRES
SEASON _____ SAISON _____



A. PERSONAL INFORMATION / RENSEIGNEMENTS PERSONNELS

SURNAME / LAST NAME / SEX / DATE OF BIRTH (D/M/Y)
 NOM / PRENOM / SEXE / DATE DE NAISSANCE (J/M/A) _____

MAILING ADDRESS / CITY / PROV / POSTAL CODE
 ADDRESS POSTAL / VILLE / PROV / CODE POSTAL _____

HOME PHONE / CELL PHONE / EMAIL
 TÉL DOMICILE / TÉL CELLULAIRE / COURRIEL _____

EMERGENCY CONTACT / RELATION
 CONTACT EN CAS D'URGENCE / RELATION _____

PHONE (DAYTIME) / CELL PHONE
 TÉLÉPHONE / CELLULAIRE _____

FATHER'S NAME / MOTHER'S NAME
 NOM DU PÈRE / NOM DE LA MÈRE _____

PREFERRED LANGUAGE: ENGLISH / FRENCH / MEMBERS HEALTH CARD NUMBER
 LANGUE DÉSIRÉE: ANGLAIS / FRANCAIS / CARTE D'ASSURANCE MALADIES _____

MISC INFORMATION:
 INFO: _____

B. PROGRAM INFORMATION / RENSEIGNEMENTS SUR LE PROGRAMME

*SELECT THE BOXES THAT APPLY TO YOUR PROGRAM THIS SEASON
 CHOISI LES CADRES QUI SONT APPROPRIER A TONS PROGRAMME CETTE ANNÉE*

DISCIPLINE	LEVEL / NIVEAU	CARD / CARTES
ALPINE / ALPIN	COMMUNITY / COMMUNAUTÉ	RECREATION / RÉCREATIONNEL
SKI CROSS	GENERAL MEMBER / MEMBRE GENERAL	NATIONAL / NATIONAUX
ALPINE / ALPIN + SKI CROSS	ENTRY LEAGUE / PROG DÉV	FIS (1 DISCIPLINE)
	COMPETITIVE MEMBER / SKI COMPÉTITIF	FIS (2 DISCIPLINE)
	K1 K2 J1 J2	
	SR MA	
	COACH / ENTRAINEUR	
	OFFICIAL / OFFICIEL	
	VOLUNTEER / VOLONTAIRE	

CLUB NAME / NOM DU CLUB: _____

NATIONAL CARD NO(ALPINE): / NATIONAL CARD NO(SX):
 N CARTES NATIONAUX(ALPIN): / N CARTES NATIONAUX(SX): _____

FIS CARD NUM (A): / FIS CARD NUM(SX):
 N CARTES FIS (A): / N CARTES FIS(SX): _____

C. CONSENT / CONSENTEMENT

I HAVE READ AND UNDERSTAND THIS RELEASE OR LIABILITY AND INDEMNIFICATION AGREEMENT ON THE REVERSE PRIOR TO SIGNING IT AND I AM AWARE THAT BY SIGNING THIS RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXTOF-KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES. *IN SIGNING THIS CONSENT/RELEASE I AGREE TO THE FOLLOWING:*

A) AUTHORIZE ACA/PSO AND/OR CLUB TO USE MY IMAGE IN PRINT OR VIDEO FOR THE PROMOTION OF SKIING.

B) AUTHORIZE ACA/PSO AND/OR CLUB TO USE MY EMAIL ADDRESS SUPPLIED ABOVE FOR COMMUNICATION PURPOSES. I DO NOT AUTHORIZE ACA/PSO AND/OR CLUB TO RELEASE THIS PERSONAL INFORMATION TO A THIRD PARTY FOR PROMOTION OR SOLICITATION.

JE DÉCLARE AVOIR LU ET COMPRIS CETTE EXONÉRATION DE RESPONSABILITÉ ET D'INDEMNISATION AU VERSO AVANT DE LA SIGNER. JE COMPRENDS PARFAITEMENT QU'EN SIGNANT LADITE EXONÉRATION DE RESPONSABILITÉ ET D'INDEMNISATION, JE RENONCE À CERTAINS DROITS RECONNUS PAR LA LOI QUE MES HÉRITIERS OU MOI-MÊME, MES PLUS PROCHES PARENTS, MES EXÉCUTEURS TESTAMENTAIRES, LES ADMINISTRATEURS DE MA SUCCESSION ET MES AYANTS DROIT POURRIONS AVOIR CONTRE LES RENONCIATAIRES. EN SIGNANT CE CONSENTEMENT/EXONÉRATION, JE CONSENS À:

A) AUTORISER ACA/OSP ET/OU TOUT CLUB DE SKI POUR L'UTILISATION DE MA PHOTO OU VISUEL POUR DES FINS D'IMPRESSON, ACCÈS INTERNET OU VIDÉO POUR LA PROMOTION DU SKI.

B) AUTORISER ACA/OSP ET/OU TOUT CLUB DE SKI À ME CONTACTER VIA MON ADRESSE COURRIEL INSCRITE CI-DESSUS POUR DES FINS DE COMMUNICATIONS. PAR CONTRE, JE N'AUTORISE PAS ACA/OSP ET/OU TOUT CLUB DE SKI DE DIVULGER CETTE INFORMATION PERSONNELLE À UNE TIERCE PARTIE POUR DES FINS PROMOTIONNELLES OU DE SOLICITATION.

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

PARTICIPANT: I AM AWARE THAT SKIING INVOLVES CERTAIN DANGER AND RISKS, INCLUDING, BUT NOT LIMITED TO COLLISION WITH NATURAL AND MAN-MADE OBJECTS AND WITH OTHER SKIERS AND SPECTATORS AND FALLING AT HIGH SPEED WHILE RACING OR TRAINING AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH DANGERS AND RISKS AND THE POSSIBILITY OR PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THERE FROM.

IN CONSIDERATION OF ALPINE CANADA ALPIN (A.C.A.) AND THE CANADIAN SNOWSPORTS ASSOCIATION (THE C.S.A.) ACCEPTING MY APPLICATION FOR REGISTRATION AND PERMITTING ME TO PARTICIPATE IN COMPETITIONS, EVENTS OR TRAINING AUTHORIZED OR SANCTIONED BY A.C.A. AND THE C.S.A., I HEREBY FOR MYSELF MY HEIRS, NEXT-OF-KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS, HEREBY AGREE AS FOLLOWS:

1. TO WAIVE ANY AND ALL CLAIMS THAT I MAY HAVE AGAINST A.C.A., THE C.S.A., THE SKI CLUB, ZONE OR DIVISION NAMED IN SECTION ON THE REVERSE. ANY OTHER SKI CLUB OR SKI AREA CONNECTED WITH SUCH COMPETITIONS, EVENTS, TRAINING AND THEIR DIRECTORS, OFFICERS, COACHES, EMPLOYEES, REPRESENTATIVES, OFFICIALS, AGENTS, VOLUNTEERS AND SPONSORS (ALL OF WHOM ARE HEREINAFTER COLLECTIVELY REFERED TO AS THE RELEASEES).

2. TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, INJURY OR EXPENSE THAT I MAY SUFFER OR THAT MY NEXT-OF-KIN MAY SUFFER AS A RESULT OF MY PARTICIPATION IN THE SAID COMPETITIONS, EVENTS OR TRAINING DUE TO ANY CAUSE, WHATSOEVER, INCLUDING NEGLIGENCE ON THE PART OF THE RELEASEES.

3. TO HOLD HARMLESS AND INDEMNITY THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY PROPERTY DAMAGE, PERSONAL INJURY OR DEATH TO ANY THIRD PARTY RESULTING FROM MY PARTICIPATION IN THE SAID COMPETITIONS EVENTS OR TRAINING.

RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT (IF COMPETITOR UNDER 19 YEARS OF AGE)

PARENT / GUARDIAN: I HAVE READ AND UNDERSTAND THE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT SET OUT ABOVE IN CONSIDERATION OF ALPINE CANADA ALPIN (A.C.A.) AND THE CANADIAN SNOWSPORTS ASSOCIATION, (C.S.A.) ACCEPTING THE APPLICATION FOR REGISTRATION OF:

(HEREAFTER REFERED TO AS "THE COMPETITOR") AND PERMITTING THE COMPETITOR TO PARTICIPATE TO COMPETITONS, EVENTS OR TRAINING AUTHORIZED OR SANCTIONED BY A.C.A. AND THE C.S.A.. I HEREBY FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS AS FOLLOWS:

1. TO WAIVE ANY AND ALL CLAIMS THAT I MAY HAVE AGAINST A.C.A., THE C. S. A., THE SKI CLUB, ZONE OR DIVISION NAMED IN SECTION A ABOVE, ANY OTHER SKI CLUB OR SKI AREA CONNECTED WITH SUCH COMPETITIONS, EVENTS, TRAINING AND THEIR DIRECTORS, OFFICERS, COACHES, EMPLOYEES, REPRESENTATIVES, OFFICIALS, AGENTS, VOLUNTEERS AND SPONSORS (ALL OF WHOM ARE HEREINAFTER COLLECTIVELY REFERED TO AS THE RELEASEES.)

2. TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE INJURY OR EXPENSE THAT I MAY SUFFER OR THAT MY NEXT-OF-KIN MAY SUFFER AS A RESULT OF MY OR THE COMPETITOR'S PARTICIPATION IN THE SAID COMPETITIONS, EVENTS TRAINING DUE TO ANY CAUSE WHATSOEVER INCLUDING ANY NEGLIGENCE ON THE PART OF THE RELEASEES.

3. TO HOLD HARMLESS AND INDEMNITY THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY PROPERTY, DAMAGE, PERSONAL INJURY OR DEATH SUSTAINED BY THE COMPETITOR OR BY ANY THIRD PART RESULTING FROM THE COMPETITOR'S PARTICIPATION IN THE SAID COMPETITIONS, EVENTS OR TRAINING.

EXONÉRATION DE RESPONSABILITÉ ET ACCEPTATION DES RISQUES

PARTICIPANT: JE RECONNAIS QUE LE SKI ALPIN COMPORTE CERTAINS DANGERS ET RISQUES Y COMPRIS, SANS Y ÊTRE LIMITÉ, LES COLLISIONS AVEC DES OBJETS NATURELS OU FABRIQUÉS, DES SKIEURS ET DES SPECTATEURS, ET LES CHUTES À GRANDE VITESSE PENDANT UNE DESCENTE OU L'ENTRAÎNEMENT. J'ACCEPTÉ ET PRENDS EN CHARGE LIBREMENT ET TOTALEMENT TOUS CES RISQUES ET DANGERS, AINSI QUE LES RISQUES DE BLESSURES PERSONNELLES, DE DÉCÈS, DE DOMMAGES À LA PROPRIÉTÉ OU DE PERTES QUI POURRAIENT EN DÉCOULER.

DANS LE CAS OÙ ALPINE CANADA ALPIN (A.C.A.) ET L'ASSOCIATION CANADIENNE SPORTS D'HIVER (A.C.S) ACCEPTE MA DEMANDE D'INSCRIPTION ET ME PERMET DE PRENDRE PART À DES COMPÉTITIONS, ACTIVITÉS OU SÉANCES D'ENTRAÎNEMENT AUTORISÉES OU SANCTIONNÉES PAR L'A.C.A. ET OU L'A.C.S.. JE CONSENS EN MON NOM ET EN CELUI DE MES HÉRITIERS, DE MES PLUS PROCHES PARENTS, DE MES EXÉCUTEURS TESTAMENTAIRES, DES ADMINISTRATEURS DE MA SUCCESSION ET DE MES AYANTS DROIT, À ME CONFORMER AUX DISPOSITIONS SUIVANTES:

1. JE RENONCE À TOUTE RÉCLAMATION QUE JE POURRAIS AVOIR CONTRE A.C.A., L'A.C.S., LE CLUB DE SKI, ZONE OU DIVISION CITÉ DANS LA SECTION À L'ENDOS, TOUT AUTRE CLUB DE SKI OU TOUTE STATION DE SKI LIÉS À CES COMPÉTITIONS, ACTIVITÉS, ET SÉANCE D'ENTRAÎNEMENT AINSI QUE LEURS DIRECTEURS, ADMINISTRATEURS, ENTRAÎNEURS, EMPLOYÉS, REPRÉSENTANTS, PORTE-PAROLE, AGENTS, BÉNÉVOLES ET COMMANDITAIRES (ET QUI SONT TOUS DÉSIGNÉS CI-APRÈS SOUS L'APPELLATION "LES RENONCIATAIRES").

2. J'EXONÈRE LES RENONCIATAIRES DE TOUTE RESPONSABILITÉ POUR TOUTE PERTE, TOUT DOMMAGE, TOUTE BLESSURE OU DÉPENSE QUE MES PLUS PROCHES PARENTS OU MOI-MÊME POURRIONS SUBIR À LA SUITE DE MA PARTICIPATION AUX DITES COMPÉTITIONS ACTIVITÉS OU SÉANCES D'ENTRAÎNEMENT PEU IMPORTE LA CAUSE, Y COMPRIS LA NÉGLIGENCE DE LA PART DES RENONCIATAIRES.

3. J'EXONÈRE LES RENONCIATAIRES DE TOUTE RESPONSABILITÉ POUR TOUT DOMMAGE À LA PROPRIÉTÉ, TOUTE BLESSURE PERSONNELLE OU TOUT DÉCÈS D'UNE TIERCE PERSONNE, RÉSULTANT DE MA PARTICIPATION AUX DITES COMPÉTITIONS, ACTIVITÉS OU SÉANCES D'ENTRAÎNEMENT.

EXONÉRATION DE RESPONSABILITÉ ET D'INDEMNISATION (MOINS DE 19 ANS)

PARENT / TUTEUR: JE DÉCLARE AVOIR LU ET COMPRIS LA FORMULE D'EXONÉRATION DE RESPONSABILITÉ ET D'ACCEPTATION DES RISQUES DÉCRITE CI-DESSUS DANS LE CAS OÙ ALPINE CANADA ALPIN (A.C.A.) ET L'ASSOCIATION CANADIENNE SPORTS D'HIVER (A.C.S.) ACCEPTE LA DEMANDE D'INSCRIPTION DE:

(DÉSIGNÉ(E) À L'ENDOS SOUS LE NOM "L'ATHLÈTE") ET LUI PERMET DE PRENDRE PART À DES COMPÉTITIONS, ACTIVITÉS OU SÉANCES D'ENTRAÎNEMENT AUTORISÉES OU SANCTIONNÉES PAR A.C.A. ET L'A.C.S.. JE CONSENS EN MON NOM ET EN CELUI DE MES HÉRITIERS DE MES PLUS PROCHES PARENTS, DE MESEXÉCUTEURS TESTAMENTAIRES, DES ADMINISTRATEURS DE MA SUCCESSION ET DE MES AYANTS DROIT, À ME CONFORMER AUX DISPOSITIONS SUIVANTES:

1. JE RENONCE À TOUTE RÉCLAMATION QUE JE POURRAIS AVOIR CONTRE A.C.A., L'A.C.S., LE CLUB DE SKI ZONE OU DIVISION CITÉ DANS LA SECTION À L'ENDOS, TOUT AUTRE CLUB DE SKI OU TOUTE STATION DE SKI LIÉS À CES COMPÉTITIONS, ACTIVITÉS ET SÉANCES D'ENTRAÎNEMENT AINSI QUE LEURS DIRECTEURS, ADMINISTRATEURS, ENTRAÎNEURS, EMPLOYÉS, REPRÉSENTANTS, PORTE-PAROLE, AGENTS, BÉNÉVOLES ET COMMANDITAIRES (ET QUI SONT TOUS DÉSIGNÉS CI-APRÈS SOUS L'APPELLATION "LES RENONCIATAIRES").

2. J'EXONÈRE LES RENONCIATAIRES DE TOUTE RESPONSABILITÉ POUR TOUTE PERTE, TOUT DOMMAGE, TOUTE BLESSURE OU DÉPENSE QUE MES PLUS PROCHES PARENTS OU MOI-MÊME POURRIONS SUBIR À LA SUITE DE MA PARTICIPATION OU CELLE DU COMPÉTITEUR AUX DITES COMPÉTITIONS, ACTIVITÉS OU SÉANCES D'ENTRAÎNEMENT PEU IMPORTE LA CAUSE, Y COMPRIS LA NÉGLIGENCE DE LA PART DES RENONCIATAIRES.

3. J'EXONÈRE LES RENONCIATAIRES DE TOUTE RESPONSABILITÉ POUR TOUT DOMMAGE À LA PROPRIÉTÉ, TOUTE BLESSURE PERSONNELLE, DÉCÈS DU COMPÉTITEUR OU CELUI D'UNE TIERCE PERSONNE RÉSULTANT DE LA PARTICIPATION DU COMPÉTITEUR AUX DITES COMPÉTITIONS, ACTIVITÉS OU SÉANCES D'ENTRAÎNEMENT.

PARTICIPANTS SIGNATURE
SIGNATURE DE PARTICIPANT

DATE

SIGNATURE OF PARENT OR GUARDIAN
SIGNATURE DU PARENT OU DU TUTEUR

DATE

NAME OF WITNESS/NOM DU TÉMOIN

ADDRESS OF WITNESS/ADRESSE DU TÉMOIN

SIGNATURE OF WITNESS/SIGNATURE DU TÉMOIN

DATE