

BIB #

EVENT REGISTRATION FORM

PAID \$ _____

Athlete's Name:	
Membership #:	Address:
Province/Territory:	Postal Code:
Telephone Number:	Email:
Birthday: (day, month, year)	Sponsor(s):
Emergency Contact:	
Telephone Number:	Cell Number:
Relation to Athlete:	

I am aware that snowboarding/skiing involves certain danger and risks, including, but not limited to collision with natural and man-made objects and with other snowboarders/skiers and spectators, falling at high speeds while racing or training, and/or entering into avalanche risk areas in mountainous regions and I freely accept and fully assume all such dangers and risks and the possibility of personal injury, death, property damage, or loss resulting there from. Based on this understanding I absolve Snowboard Yukon, Yukon Freestyle Ski Association, Yukon Alpine Ski & Snowboard Association, Great Northern Ski Society, Mount Sima, the coaches, other paid employees and volunteers of all responsibility for any accident, injury or mishap which may result through participation in this program.

_____ Athlete Signature	_____ Guardian Signature (if under 18)
_____ Date of Signature	_____ Date of Signature

EVENT: _____

CATEGORY: _____

GENDER: MALE FEMALE

MEMBERSHIP & HELMET REQUIRED