



Glacier Program Registration 2012/2013

Parent/Guardian 1 First Name:	Last Name:
Parent/Guardian 2 First Name:	Last Name:

Contact Information

Street Number/Name:		
City:	Apt No:	Postal Code:
Primary Phone No.:		Secondary Phone No.:
Primary E-Mail:		Secondary Email:

Email address is important as we use it to provide you communications from the club. Please print clearly – thanks

* GLACIER SKI CLUB DUES ARE PAYABLE IN FULL NO LATER THAN DECEMBER 15, 2013. IF DUES ARE NOT PAID IN FULL BY THIS DATE, GLACIER SKI CLUB AND ITS REPRESENTATIVES RESERVE THE RIGHT TO EXCLUDE THOSE RACERS FROM PARTICIPATING IN ANY CLUB ACTIVITIES INCLUDING TRAINING AND RACES.

Fee Schedule:

Age Category*	U10/U12		U14		U16		U18/U21	
	Ages 8 to 11		Ages 12 to 13		Ages 14 to 15		Ages 16 to 20	
	Club Fee	Racing/ AOS Fee	Club Fee	Racing/ AOS Fee	Club Fee	Racing/ AOS Fee	Club Fee	Racing/ AOS Fee
Racing Fees: Sat only (starts Jan 12 th) 8 week 1 day program –U10/U12only	\$350	\$120	n/a		n/a		n/a	
Race Fees: Sat/Sun (starts Jan 12 th) 8 week 2 day program	\$550	\$120	\$550	\$170	\$550	\$190	\$550	\$190
Christmas Camp 4 days - Dec 27 – 30	\$200.00							

*Age as of Dec. 31st

Late Fee of \$50/family after October 28th/12

Racer Personal Information				Xmas Camp Fee	Club Fee	Racing/ AOS Fee	Total
Racer 1	Name (First and Last)						
	Birth date (M/D/Y)						
	Age Category (U10/U12, U14, U16, U18/U21)		Gender (M or F)				
Racer 2	Name (First and Last)						
	Birth date (M/D/Y)						
	Age Category (U10/U12, U14, U16, U18/U21)		Gender (M or F)				
Racer 3	Name (First and Last)						
	Birth date (M/D/Y)						
	Age Category (U10/U12, U14, U16, U18/U21)		Gender (M or F)				
	Late Fee after October 28 th \$50/family						Total

Make Cheques Payable to GLACIER SKI CLUB. Please return all completed forms with payment to:
Ileana Cojocaru, Glacier Ski Club Secretary, 12 Greenbriar Crt., Aurora, Ontario, L4G 5X6

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Important Notes/Requirements

- ☺ Each athlete and volunteer will be *required* to submit an online Alpine Ontario Waiver form. It can be found online at: <http://www.alpineontario.ca/Membership/tabid/36/Default.aspx>. This is particularly important from a liability perspective and therefore no racer will be allowed on the hill for any training without the AOS online waiver being completed.
- ☺ Each athlete and parent will be *required* to agree to and sign a code of conduct committing to a safe & fun experience for all.
- ☺ The Canadian Snow Sports Association of which Alpine Ontario South is a part, publishes a SNOWSPORTS CLUB RISK MANAGEMENT document as an essential element of the Canadian Snow Sports Association (CSA) liability insurance program. All club members and coaches must be aware of and should read the document which is available in the club policy and procedures manual. A copy may also be viewed at: <http://www.canadiansnowsports.com/e/insurance/index.htm>
- ☺ Affiliations: Glacier Ski Club is a participating member of Alpine Ontario South.
- ☺ Racers must hold a Season's Pass to Mount St. Louis Moonstone Ski Hill.
- ☺ **ALL forms to be completed & funds received in order to be placed on racing team. Refunds will not be given after January 01/13.**

Waiver

I, the undersigned, do hereby absolve Mount St. Louis Moonstone, and the Glacier Ski Club, together with their Officers, Employees and Volunteers, from all claims and demands respecting any damage or injury sustained by myself and/or any of my dependents listed above arising out of any activity, program or event conducted or sponsored by the Glacier Ski Club.

Medical

I further agree that a member of the Glacier Ski Club Executive and/or Coach and/or Team Manager, may authorize any emergency medical attention necessary, should any accident or illness occur during a Club activity and I agree that all responsibility or medial health and life insurance rest with the parent of the participant concerned. Each athlete will be required to complete a medical information form prior to the start of the season/Christmas Camp.

Sharing Contact Information

I understand that my contact information will be shared with the other members of the Glacier Ski Club, but will not be used for any solicitation purposes. No member of Glacier Ski Club will use the contact information of another member for solicitation purposes.

Non-Profit Corporation

Glacier Ski Club is a non-profit organization. In order to minimize expenses, the club financial statements will not be audited or otherwise reviewed by an external accountant unless required by legislation. However, the club will maintain accurate financial books and records and produce timely annual financial statements in accordance with Generally Accepted Accounting Principles (GAAP) that meet the statutory requirements for a not for profit corporation. The financial statements will include an income statement, balance sheet, and notes to the financial statements in accordance with GAAP. Sometimes we need to vote on important club matters (i.e. by-laws and such) as part of being a non-profit organization, so it is important for each family to nominate one voting member per family.

Family voting member _____ e-mail _____

Volunteers (more details outlined in parent handbook)

To help make Glacier a success, we need your help. We expect parents to volunteer. Please check all area(s) of interest:

<input checked="" type="checkbox"/>	Assisting when hosting race (all hands on deck when we host)	Volunteer Committee (organizing the volunteers!)
<input type="checkbox"/>	Race Crew (assisting with course set up – hosting and/or training)	Managing a team
<input type="checkbox"/>	Hosting: Registration Desk help (bibs, tickets, score recording)	Fund raising (grant applications, cow bell sales etc.)
<input type="checkbox"/>	Hosting: On course help (gate judge, chief of gates)	Social events organizing (BBQ, Skiasta, etc.)
<input type="checkbox"/>	Hosting: Timing Hut help (timer, announcer, score recording)	Communications (newsletters, website)
<input type="checkbox"/>	Hosting: Finish Line help (whiteboard recording, bib collection)	
☺ Parent Ski Coaching/Instructor Certification and/or Race Official Certification		Parent 1: Name & Certification
		Parent 2: Name & Certification

I agree to all of the above terms:

Signature or Parent or Guardian _____ Date _____

For Office Use only:	AOS Waiver Completed _____	Medical & Code of Conduct
Date Received: _____	Paid: _____ Cheque #. _____ Cash _____	Completed _____