

****EMAIL ADDRESS _____****

SKIER #1

Skier's Name:		Grade:	
Parent Name:	Home Phone:	Cell Phone:	
Current address:			
Own Skis	rent Ski <i>(Please circle)</i>	* Beginner	Intermediate Advanced * How many years have you been skiing?_____

SKIER #2

Skier's Name:		Grade:	
Parent Name:	Home Phone:	Cell Phone:	
Own Skis	Rent Skis <i>(Please circle)</i>	* Beginner	Intermediate Advanced * How many years have you been skiing?_____

SKIER #3

Skier's Name:		Grade:	
Parent:	Home Phone:	Cell Phone:	
Own Skis	Rent Skis <i>(Please circle)</i>	* Beginner	Intermediate Advanced * How many years have you been skiing?_____

EMERGENCY CONTACT IF PARENT IS NOT AVAILABLE

Name:		
Relationship:	Home Phone:	Cell Phone:

PAYMENT INFORMATION

Will you be riding the bus? <i>(Please circle)</i> Yes No	<u>AMOUNT</u>
# Club Passes no rental @ \$124.00 ea _____	Club Passes:
# Club Passes with rental @ \$166.00 ea _____	
# Club Season Passes @ \$279.00 ea _____	Seas. Passes:
# Add rentals to season pass \$120.00 ea _____	
# Membership only @ \$10.00 ea _____	Membership Fees:
# Riding the Bus @ \$10.00 ea _____	Bus Fee:

CASH CHECK PAYABLE TO MARCELLUS SKI CLUB/NUMBER _____ TOTAL: _____

<u>Use your "anytime" punches during Christmas Break if Swiss Valley is open!</u>	Think Snow!		<u>**Deadline for club registration is Friday, November 18, 2011**</u>
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REGULAR SKI CLUB DATES (WEATHER PERMITTING)

Friday, January 13 th , 3:15-9:30	THURSDAY, January 19 th , 3:15-9:30 Note Day Change Due to Homecoming	Friday, January 27 th , 3:15-9:30
Friday, February 3 rd , 3:15-9:30	Friday, February 10 th , 3:15-9:30 LAST SKI CLUB, PIZZA PARTY	

My parents and I have read all of the Marcellus Ski Club information. I authorize my child to join and be a part of the Marcellus Ski Club and to adhere to all of the rules of his/her school, Ski Club and to Swiss Valley Ski Area. I understand also that I represent Marcellus Community Schools and will set a good example for my school and my community.

***Parents may take advantage of the ski club prices and use this form ***

Signature of Parent:	Date:
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