

REGISTRATION FORM FOR VOLUNTEERS
2011-2012 Ski Season

Last Name: _____ First Name: _____

Sex: _____ Age: _____ Date of Birth: _____

Address: _____

City, State, Zip: _____

Phone(s): Cell: _____ Home: _____ Work: _____

Email _____ Emergency contact: _____

SCHEDULE: Off Hill Training

December 3th _____ 9:00-12:00 Off hill training _____ 12:00-1:00 Members meeting
_____ 1:00 -3:00 Board meeting **please email RSVP** ***michiganadaptivesports@gmail.com***

PINE KNOB Learn-to-ski dates and lesson sessions:

JANUARY 3 On hill training _____ 6:00-10:00
JANUARY 8 ___ 8:30-11:30 ___ 12:00-2:30 ___ 2:30-5:00
JANUARY 22 ___ 8:30-11:30 ___ 12:00-2:30 ___ 2:30-5:00
FEBRUARY 12 ___ 8:30-11:30 ___ 12:00-2:30 ___ 2:30-5:00
FEBRUARY 26 ___ 8:30-11:30 ___ 12:00-2:30 ___ 2:30-5:00

SCHUSS MOUNTAIN January 28-29
RACE CLINIC AND LESSONS Dinner and Banquet at Shanty Creek

SAT, Jan 28 ___ 8:30-11:30 ___ 12:00-2:30 ___ 2:30-5:00
SUN Jan 29 ___ 8:30-12:00

CRYSTAL MOUNTAIN March 3-4
SAT, MAR 3 ___ 8:30-11:30 ___ 12:00-2:30 ___ 2:30-5:00
SUN MAR 4 ___ 8:30 -12:00

Do you wish to volunteer for inside registration? _____

_____ **“ON HILL”** (You must be at least 15 years of age and an intermediate skier able to ski an intermediate hill in control, and be able to lift and carry at least 50 pounds safely. After qualifying, level of volunteer in a specific discipline type will depend on demonstrated skills).

Please complete the next section:

SKILL LEVEL: _____ Intermediate _____ Advanced Intermediate _____ Advanced
_____ Certified ski instructor

PSIA Level _____ Discipline: _____

KNOWLEDGE/EXPERIENCE REGARDING DISABILITIES /PERSONS WITH DISABILITIES

Job experience:

Other experience:

Attendance at Off Hill Workshop: _____

SKIING DISCIPLINE MOST PREFERRED (IF YOU HAVE ONE):

2 Track/ 4 Track _____ 3 Track _____ Bi ski _____ Mono Ski _____

Developmentally/Cognitive Challenged _____

“OFF HILL

_____ Bottom of the Hill

_____ Registration Table

_____ Transferring skiers or skier loading onto chair lifts (You must be able to lift and carry at least 50 lbs safely)

_____ I have read and agree to volunteer policies and guidelines

Bring to off hill or on hill training or mail to:

Carol McElhiney-Luster, 1967 Tamarisk Drive, East Lansing, MI 48823-1470