



Kent Recreation and Parks Department

770 Route 52, Kent Lakes, NY 10512

Phone: 845-531-2100

E-Mail: recreation@townofkentny.gov

2014 Ski and Snowboard Club Registration Form

Fill out form completely. Please print legibly!

Registration Fees

Fees Payable to Kent Recreation

Fees Payable to Thunder Ridge

Single Fee: \$8

Family Fee: \$20

Lesson Fee: \$108

Lift Ticket & Lesson Fee: \$198

Lift, Lesson and Equipment Fee: \$348

PARTICIPANT INFORMATION

Participant's Last Name:

Home Phone Number:

E-Mail

Street Address:

City:

State:

ZIP Code:

Please list each family member that will be participating in the ski and snowboard program

1.	Age:	DOB:	4.	Age:	DOB:
2.	Age:	DOB:	5.	Age:	DOB:
3.	Age:	DOB:	6.	Age:	DOB:

SKI AND SNOWBOARD LESSON INFORMATION

Please fill out the information below for each person taking ski or snowboard lessons

Name: _____ Grade: _____ Ski Lesson Snowboard Lesson

Level: 1 1st time 2 Wedge/J-Turn 3 Wedge Turns/Toe & Heel Turns 4 Parallel Turns/Linked Turns

Does this person have any disabilities, allergies or special circumstances we should be aware of? Yes No If yes, please explain:

Name: _____ Grade: _____ Ski Lesson Snowboard Lesson

Level: 1 1st time 2 Wedge/J-Turn 3 Wedge Turns/Toe & Heel Turns 4 Parallel Turns/Linked Turns

Does this person have any disabilities, allergies or special circumstances we should be aware of? Yes No If yes, please explain:

Name: _____ Grade: _____ Ski Lesson Snowboard Lesson

Level: 1 1st time 2 Wedge/J-Turn 3 Wedge Turns/Toe & Heel Turns 4 Parallel Turns/Linked Turns

Does this person have any disabilities, allergies or special circumstances we should be aware of? Yes No If yes, please explain:

EMERGENCY CONTACT INFORMATION

In an emergency I/We cannot be reached please contact:

Relationship to Participant:

Phone Number:

2nd Phone Number:

PARENT OR GUARDIAN AUTHORIZATION, DISCLAIMER AND WAIVER OF LIABILITY

By law The Kent Recreation and Parks Department cannot and does not provide medical insurance for the participants in its programs. I hereby authorize to participate in the ski and snowboard program sponsored by The Kent Recreation program. I hereby release the agents, servants and employees from any liability for personal injury or property damage sustained by myself, spouse or child(ren) in connection with such participation. In the event of injury, I authorize Kent Recreation officials to take myself/spouse/child(ren) to a hospital for treatment at my expense.

Date: _____ Parent or Guardian Signature: _____

Please Print Name: _____

OFFICE USE

Registration Date:

Registration Fee:

Cash

Make checks payable to:
KENT RECREATION

Check Number:

Receipt Number: