Camp Registration Form

WILLSKI LLC Race Camps
430 Hill St. Hartland, WI 53029
414-467-3089

2011-2012 Season

A SEPARATE REGISTRATION FORM MUST BE COMPLETED FOR EACH ATHLETE. PLEASE PROVIDE REQUESTED INFO AND SIGN AT BOTTOM.

Athlete Name:_____Male_____ Female_____

Street Address:_____

City:_____State:_____Zip:_____

Phone Number: (_____)_____ Birth Date:_____

Contact # _____
Contact # _____
E-mail Address: 1._____2._____

Parents Names:_____
Insurance Info:_____

Camp Options:

Checks payable to: **WILLSKI LLC**

Oct 27-30	"Free Ski" Camp	(4 day camp x 200.00 p/d)	Total: $_____
Nov 3-6	"Early SL Camp"	(4 day camp x 200.00 p/d)	Total: $_____
Nov 10-13	"GS" Camp"	(4 day camp x 200.00 p/d)	Total: $_____
Nov 17-20	"Adv SL Camp"	(4 day camp x 200.00 p/d)	Total: $_____
Nov 24-27	"Aspen WC"	(4 day camp x 200.00 p/d)	Total: $_____
Nov 30-Dec 5	"WC Camp"	(5 day camp x 200.00 p/d)	Total: $_____

ALL Camps Include- Coaching, Lane fees, video review, Lift, Lodging and tons of Fun!

Waiver:

I HEARBY RELEASE WILLSKI LLC, ITS MEMBERS, OFFICERS, DIRECTORS, EMPLOYEES, AND AGENTS AND ANY OTHER PERSON OFFICIALLY CONNECTED WITH THE CLUB, TEAM WJR AND USSA, FOR ANY LIABILITY FROM ANY INJURIES OR DAMAGES ARISING FROM ANY SON'S/DAUGHTER'S OR FROM MY OWN PARTICIPATION IN OR PRESENCE AT PRACTICE OR RACES OR AT ANY FUNCTION OR EVENT ASSOCIATED WITH THE WILLSKI LLC PROGRAM.

Participant:_____ (Sign) _____
(Print) _____

Parent: _____ (Sign) _____
(Print) _____