

Bill Koch Registration Form

Please print ALL THREE PAGES of this Registration form and mail to Jean Tufts. You are not registered until we have all three forms. We do have a limit of 100 skiers, so sign up early!

Parent's Names _____

Full Mailing address _____

Primary email _____

Primary phone # _____

Emergency phone # _____

Full Name of Participating child	Grade and Age	Birth Date (mm/dd/yr)	Ability *

Please indicate the placement of your child based on the following ability or grade:

* Beginner K-3, Beginner 4-8, Regular K-1, 2-3, 4-5, 6, 7, 8 or Skate K-3, Skate 4-8

Note: Our priority is Classic technique instruction. We will offer Skate skiing only if there are parent leaders who can teach skating techniques. Skating rental gear is very limited.

Fees: Sleepy Hollow has not increased fees this year!

Bill Koch Fee- For all skiers

- Sleepy Hollow Family Seasons Pass holders: \$55/ per child _____
- Non- Family Season Pass Holders: \$90/ per child _____

Additional Fees- (In addition to the Bill Koch Fee)

- Mon./Wed. Junior High Racer Program: ADD \$100 to the Bill Koch Fee _____
- Friday Only Parent Trail Pass (if you are not helping and want to ski): \$50/one adult or \$75/ for Two Parents. _____
- Monday/Wednesday Jr. High Parent Trail Pass: \$75/adult _____
- Season Rental Equipment Fee: \$50 (Fridays Only) \$75 (Entire Season) _____
- Junior High Race Program rentals \$75 (Entire Season) _____

BKL FEE: _____

Additional Fees: _____

Total Amount Paid: _____ Check _____ or Paypal _____

Please make all checks payable to: Sleepy Hollow Inn, Ski and Bike Center.

Mail to: Jean Tufts, 1125 Big Hollow Road, Starksboro, VT 05487

Parent Leaders! We need your help!

I would like to be a Parent Leader: Name _____

I would like to be an Assistant Leader: Name _____

What ability/grade would you like to help with (please circle)? Beginner K-3 Beginner 4-8
1st/2nd 3rd/4th 5th-8th Skate K-3 Skate 4-8

Can you come most Fridays? _____

Can you help with the Junior High Race Program on Monday/Wednesdays? _____

Remember!! Free Season's Pass for all BKL Kids!

All rentals are subject to availability and stay at Sleepy Hollow.

For Coaching or Registration Questions and other Information Contact:

Jean Tufts at JeanTufts456@gmail.com

**NEW ENGLAND NORDIC SKI ASSOCIATION
WAIVER AND RELEASE OF LIABILITY**

What is NENSA? And.... Why do you need to join NENSA?

NENSA is the New England Nordic Ski Association. All BK clubs members are required to join this organization. The fee is \$25/child and is included in the overall fee that you pay Sleepy Hollow. It covers the insurance liability for all volunteers, coaches, parents and each child. In addition, as a NENSA member you will enjoy: Six issues of New England Nordic Newsletter. Up to date information on ski races, events, equipment and more. Bill Koch Festival, hosted by NENSA. Stickers and Poster for your child. Seminars and clinics for your club.

In consideration for the rights and privileges associated with membership in the New England Nordic Ski Association, I acknowledge and agree to be bound by the following:

1. Identification of Risks. I understand that participation in any skiing activity, including but not limited to, preparation for, participation in, and coaching of activities in cross-country ski competitions and clinics, involve risk of serious injury, including permanent disability, death and other losses, due to inactions or negligence of myself or others.
2. Assumption of the Risk. I agree that I am responsible for my safety while participating in activities associated with NENSA, and that such responsibility includes participation only a) when I am both physically and psychologically prepared to participate safely, b) after fully familiarizing myself with the venue before beginning the activity, and c) while using the equipment of a type and condition reasonably necessary to safely participate. I assume all risk connected with responsibility for any injury or loss connected with my participation.
3. Waiver. Aware of the risks and willing to assume them, I hereby release and agree to hold harmless the New England Nordic Ski Association (NENSA), its officers, directors, employees, agents, coaches, trainers, doctors, officials, volunteers, affiliates, event organizers, sponsors, owners of property and trails used by me (Released Parties) from loss, injury, or death to myself or to any other person, or other damage to person or property resulting from my participation in events and competition and any related activities including, without limitation activities in connection with sponsorship, organization or execution of any event and travel to and from such event, whether I may participate as an athlete, coach, volunteer, spectator, or in any other manner associated with NENSA. This release is intended as a waiver of any claim I may have whether based upon negligence, breach of warranty, contract or other legal theory, against any of the above Released Parties, accepting myself the full responsibility for any such loss, injury, death or damage which may result. I intend for this release to also apply to my relatives, personal representatives, heirs, beneficiaries, next of kin, and assigns. If any part of this agreement is determined to be unenforceable, all other parts shall be given full force and effect. This waiver does not release acts of gross negligence or willful and wanton misconduct of any party.
4. Insurance. I currently have, and agree to maintain throughout the time that I train and compete, valid and sufficient medical and accident insurance. I understand that this is my sole responsibility and release all persons and entities from providing this coverage for me.
5. Image. I grant permission to NENSA to use my name, and any photograph, video, image, results or record of me from any NENSA event for all purposes NENSA may choose.

Signature*: _____ Printed Name: _____

Date: _____

*Parent or guardian signature if member/s is/are under 18 years of age.

Additional Family Members

Signature: _____ Printed Name: _____ Date: _____

Signature: _____ Printed Name: _____ Date: _____

Signature: _____ Printed Name: _____ Date: _____

Signature: _____ Printed Name: _____ Date: _____