

Bromley Outing Club

Box 775, Manchester Center, VT 05255 802-824-6498 boc@vermontel.net www.bromleyoutingclub.com

2007/08 Weekend Program Registration

(Please print as neat as possible)

Parents Names: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Local VT Phone: _____ Home Phone: _____

Cell Phone: _____ (important for on-mountain communication)

E- Mail: _____ (important – most information is sent via email)

ATHLETE INFORMATION:

Name _____ Age _____ DOB _____ Sex: M / F

Name _____ Age _____ DOB _____ Sex: M / F

Name _____ Age _____ DOB _____ Sex: M / F

Name _____ Age _____ DOB _____ Sex: M / F

PROGRAM FEES:

<u>Athlete Name</u>	<u>Program /Age Groups*</u>	<u>Cost**</u>	<u>Line Total</u>
_____	JVI (6-7)	\$950.00	_____
_____	JV (8-10)	\$950.00	_____
_____	JIV (11-12)	\$950.00	_____
_____	JIII (13-14)	\$950.00	_____
_____	JI, JII (15-20)	\$950.00	_____
_____	Snowboard	\$850.00	_____
_____	Freestyle	\$850.00	_____
_____	All Mountain	\$850.00	_____

* age based on D.O.B. as of December 31st

** There is an additional \$100 fee for registrations after Oct. 15.

USSA Club insurance included _____ \$0

Cubby Fee - \$25 per cubby (optional) _____

Family Membership _____ \$50

Donation _____

(Exempts family from 2 day per season requirement) Volunteer Exemption Fee \$200 _____

Total Remittance _____

Please make checks to: BOC, PO Box 775, Manchester, VT 05255

Alpine Racers - Don't forget to sign up for USSA (ussa.org) & VARA (vara.org) – mid Oct. deadlines

Snowboarders & Freestylers – Check with your coach about NESA & USASA (usasa.org)

PLEASE READ & SIGN LIABILITY/MEDICAL RELEASE ON REVERSE SIDE !!

**Release of claims for personal injury and property damage
and authorization for medical treatment.**

In consideration of my (my child's) acceptance to be coached and trained by the Bromley Outing Club and staff, and entry and participation in any and all sessions, programs, camps and races, I hereby waive release and discharge any and all claims for damages for death, personal injury or property damage which I (my child) may have, or which may accrue to me (my child), as a result of my child's participation in such events. This release is intended to discharge, in advance, the directors, members, agents and employees of the Bromley Outing Club against any and all liability arising out of or connected in any way with my child's participation in these events.

I further understand that serious accidents occasionally occur during skiing and snowboarding activities. Knowing the risks of these sports and related activities, I hereby agree to assume those risks and to release and hold harmless all of the persons and entities mentioned above.

Furthermore, I give my consent for the administration of any emergency medical treatment deemed necessary, in the event that same is required, as a result of my child's participation in the events organized by the BOC.

It is further agreed that this waiver, release, and assumption of risk is binding on my heirs and assigns.

I further state that I am the parent or legal guardian of the child named below.

Name of child under 18

Parent or legal guardian (print)

Child's DOB _____

Parent or legal guardian (signature)

Child's Doctor and phone # _____

Insurance: Name of company _____ Acct # _____

Phone # _____

Does your child have any allergies, medical or medication issues of which we should be aware?

