



**Labrador Mountain
 Children's Ski School
 3 Years to Sixth Grade**



Registration Form

Date: _____

Child's Name: _____ Age: _____

Parent's Name: _____

Address: _____

City: _____ Zip Code _____

Home Phone Number (____) _____ Cell (____) _____

ARE THERE ANY MEDICAL CONDITIONS OR ALLERGIES THAT WE NEED TO BE AWARE OF ?

YES NO

(Please List)

- **At LEAST one parent MUST REMAIN on the PREMISES at all times.**
- **In the event that a Labrador Mountain employee cannot locate you, this number will be used in case of an emergency, _____.**
- **You MUST have matching card with child's bib number in order to pick up your child inside the children's center at the end of each lesson.**

Ability Level skier: (circle one)

Never Ever Beginner Beginner Skier Skier Advanced Skier

Ability Level Snowboarder: (circle one)

Never Ever Beginner Rider Advanced Rider

Children in the Children's Ski Program (depending on students' ability level) will be riding the ski lift accompanied by either an instructor, adult, or other student (age appropriate)

You **MUST** have matching card with child's bib number in order to pick up your child inside the children's center at the end of each lesson.

*****Failure to return bib after lesson will result in a \$25.00 replacement fee.*****

Parent/Guardian Signature: _____

To Be Filled Out By Ski School Staff: Bib Color: Red Green Bib # _____
