

Iorse Ski Club Training, Activities and Compet Registration/Waiver Form



Registrant Information			Emergency Contact		
Name:			Name:	Relationship:	
Address:			Address:		
City, State, Zip:			City, State, Zip:		
Phone Number:			Phone:	Cell:	
Birth Date:	Age on Jan. 1,	Sex:	Club Name:	USSA#	

Waiver & Release of Liability

- Identification of Risks: I understand that participation in any skiing activity, including but not limited to, preparation for, participation in, coaching and related activities in alpine, nordic, freestyle, speed and snowboarding competitions (the "Activity"), or any other activity conducted on the Tri Norse Property, involves risks of serious injury, including permanent disability, death and other losses, both to me and my property. I understand that these injuries and losses might result not only from my actions, but the actions, inactions or negligence of
- 2. Assumption of the Risk: I agree that I am responsible for my safety while participating in the Activity and that such reponsibility includes participating in the Activity 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 in the Activity. I assume all risks connected with responsibility for any injury or loss connected with my participation in the Activity.
- 3. Waiver: Aware of risks and willing to assume them, I hereby waive, release and hold harmless Tri-Norse Ski Club, U.S. Skiing, United States Ski Association, the U.S. Ski Team, the U.S. Ski Coaches Association and each of those organizations' affiliates, subsidiaries, officers, directors, employees, agents, coaches, trainers, doctors, officials, event organizers or sponsors ("Released Parties") from all claims by me for any liability, injury, loss or damage in any way connected with my participation in the Activity, except where caused by gross negligence or willful or wanton misconduct of the Released Parties. I intend for this waiver and release to also apply to any relatives, personal representatives, heirs, beneficiaries, and next of kin or assigns who might pursue any legal action or claim on my behalf.
- 4. Applicable Law: This waiver and release informed hereunder is to be interpreted consistent with the laws of the State of Wisconsin.
- 5. Insurance: I currently have, and agree to maintain throughout the time that I participate, 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.

I HAVE READ THIS WAIVER & RELEASE OF	LIABILITY CAREFULLY AND HAVING DONE SO, I AM S	IGNING IT VOLUNTARILY.				
Signature of	Printed	·				
Participant:	Name:	Date:				
FOR ATHLETES OF MINORITY AGE (If athlete is less than 21 years of age and a resident of West Virginia, Alabama, Mississippi, Nebraska, Pennsylvania or Wyoming, or less than 18 years of age and a resident of any other state, then the parent/legal guardian must also sign below).						
Parent/Guardian	Printed					
Signature;	Name:	Date:				
	Tri-Norse Ski Club Re	Tri-Norse Ski Club Registration & Waiver (1/18)				

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