



# HOLIDAY MOUNTIAN SLOPESTYLE – MARCH 3,2024

PLEASE PRINT CLEARLY AND COMPLETE EACH SECTION

**THIS PAPER COPY IS ONLY FOR TRY FREESTYLE ATHLETES – IF YOU HAVE A VALID MEMBERSHIP PLEASE FILL IT OUT ON SNOWREG NO EXCEPTIONS**

## A. PERSONAL INFORMATION (ALL INFORMATION MUST BE FILLED IN)

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ SEX: M  F

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_ NAME OF SKI CLUB: \_\_\_\_\_  
YYYY MM DD

EMERGENCY CONTACT: \_\_\_\_\_ EMERGENCY PHONE NUMBER: \_\_\_\_\_

## B. REGISTRATION - Age is based on Dec 31, 2023

<input type="checkbox"/> MALE 16+	<input type="checkbox"/> FEMALE 15+	\$50
<input type="checkbox"/> MALE 15U	<input type="checkbox"/> FEMALE 14U	
<input type="checkbox"/> MALE 13U	<input type="checkbox"/> FEMALE 10U	
<input type="checkbox"/> MALE 10U		
<input type="checkbox"/> Bib Deposit		\$20
		RETURNED YES / NO

## C. WAIVER SECTION

I recognize that skiing entails serious risks. Consequently, I relinquish all rights to an appeal of any kind, including the right to an appeal for bodily and material damages, regardless of the cause, against Freestyle Canada, the Canadian Snowsports Association, its officers, employees, assignees, agents, representatives, and sponsors, even if such damages result from negligence of Freestyle Canada, the Canadian Snowsports Association, its officers, employees, assignees, agents, representatives, and sponsors.

Without restricting the generality of the preceding, I also relinquish the right to any appeal against Freestyle Canada, the Canadian Snowsports Association, its officers, employees, assignees, agents, representatives, and sponsors resulting from a decision on their part, regardless of the nature of this decision.

I also recognize that skiing entails serious risks. Considering my participation, I also relinquish all rights to an appeal of any kind, including the right to an appeal for bodily and material damages, regardless of the cause, against Freestyle Canada, the Canadian Snowsports Association, its officers, employees, assignees, agents, representatives, and sponsors, even if such damages result from negligence of Freestyle Canada, its officers, employees, assignees, agents, representatives, and sponsors.

**NOTE: Rules For Higher Level Inverting (Flips) Athlete Qualifications: Qualification IS REQUIRED for any and all inverted maneuvers. Inverting athletes ONLY will require an Aerial passport readily available to present to the event jury.**

Participant Signature: \_\_\_\_\_

DATE : \_\_\_\_\_  
YYYY MM DD

Parent/Guardian Signature : \_\_\_\_\_

DATE : \_\_\_\_\_  
YYYY MM DD



# TRY FREESTYLE REGISTRATION FORM

PLEASE PRINT CLEARLY AND COMPLETE EACH SECTION

## A. PERSONAL INFORMATION (ALL INFORMATION MUST BE FILLED IN)

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ SEXE: M  F

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_ NAME OF SKI CLUB: \_\_\_\_\_  
YYYY MM DD

EMERGENCY CONTACT: \_\_\_\_\_ EMERGENCY PHONE NUMBER: \_\_\_\_\_

## B. "TRY FREESTYLE" LICENSE

TRY FREESTYLE

A one-event, trial license, beginning the day of registration for participants looking to try a Freestyle activity. Accident Insurance is not available.

## C. WAIVER SECTION

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NOTE: Authorization is needed for Aerials/Inverts by parent or Guardian if registrant is less than 18 years of age

Participant Signature: \_\_\_\_\_ DATE : \_\_\_\_\_  
YYYY MM DD

Parent/Guardian Signature : \_\_\_\_\_ DATE : \_\_\_\_\_  
YYYY MM DD