

2017 U10-12 Summer Ski CAMP

Come ski with us at Beartooth Basin June 19 – 22nd!

WHAT YOU GET:

- Slalom and GS technique and tactics
- Free-skiing and gate-training drills
- Gate training
- Daily video analysis
- Afternoon dryland activities
- Maximum 8:1 athlete to coach ratio
- Lodging and food options available
- Transportation to and from the ski area

Coaching Staff:

An experienced group of coaches from across Northern Division will be on-hand to provide instruction and guidance.

SCHEDULE:

June 18 – Camp kick-off meeting at 6 pm at Roosevelt School gym (17th St. & Broadway) June 19-22 – free-skiing, drills, gate-drills, and gate training.

Daily program:

6:45 am meet at Roosevelt School

7:00 am depart for Beartooth Basin

8:00-12:00 pm on-snow (snack & water breaks as necessary)

12:15 - 12:30 pm depart ski area

3:30 - 5:30 pm dryland activities and video at Roosevelt Gym

June 21 - Camp Pizza Party

*Camp concludes after skiing on Thursday (no afternoon activities).

COST

\$660 – full boarding option. Food and lodging included.

\$525 - Food and lodging NOT included.

Late Registration Fee (after May 15): \$50

Ski Area:

Located 23 miles south of Red Lodge, and in the heart of the spectacular Beartooth Mountains! http://www.beartoothbasin.com/

WARNING – ATHLETES MUST BE ABLE TO SKI EXPERT TERRAIN AND BE ABLE TO COMFORTABLY RIDE

A POMA-LIFT. Please review the Beartooth Basin website for a better idea on the terrain available and the lift services provided. All training – free skiing, gate drills, gate training – will be conducted on the lower lift which is intermediate terrain. Hiking into the lower training area via the saddle trail will be available for athletes uncomfortable with skiing the top terrain.

MORE INFO:

Pete Petry, Camp Director, T. 970 - 389 - 5523, petepetry07@gmail.com Vanessa Selby, Program Director, Silver Run Ski Club, T. (406) 208-1875, silverrunski@gmail.com

Registration Form Silver Run Ski Foundation Summer Camp 2017 Return to PO Box 725 Red Lodge, MT 59068

| Name | USSA Number Date of Birth Date | | | | | | | |
|--|---------------------------------------|---------------------|-------------|-------------------|--------|--|--|--|
| Age | Date of Birth | Date | | | | | | |
| Camp Options: | (circle your choice) | | | | | | | |
| | ·14 camp for U14-U1 9 | • | | | | | | |
| F | ull package w/ food an | d lodging \$765 | | | | | | |
| S | kiing/coaching package | e (no food or lodgi | ng) \$590 | | | | | |
| June 19- | -22 camp for U10-U1 2 | 2 | | | | | | |
| | Full package w/food and lodging \$660 | | | | | | | |
| Skiing/coaching package (no food or lodging) \$525 | | | | | | | | |
| Lodging will be in homes supervised by coaches Please include a deposit of ½ to reserve your spot by May 1 , with balance due upon arriva | | | | | | | | |
| | | | | | ırriva | | | |
| Make checks pay | able to Silver Run, mail | to PO Box 725 Red I | Loage 5906 | 8 | | | | |
| Parents Names | | | | | | | | |
| Mailing Address | | City | State | Zip | | | | |
| E-mail Address | of parents | | | | | | | |
| Email Address | of athletee Day-() | | | | | | | |
| Mother's Phone | e Day-() | Night-(|) | | | | | |
| rather's Phone | Day-() | Nignt-(|) | | | | | |
| Athlete Phone I | Number | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | I Dalassa | | | | | | | |
| Medica | il Release | | | | | | | |
| We (I) | | , the parent (s |) or guardi | an (s) of | | | | |
| 7 | | A minor entrus | st such mir | nor into the care | of | | | |
| Silver Run Ski f | oundation adult coach | es) or adult chap | eron (s) fo | or those periods | of | | | |
| | ason when the above i | | | | | | | |
| | nber of Silver Run Ski E | | | | _ | | | |
| | caring adult (s) to obta | | - | _ | | | | |
| • , | . It is understood that | ever effort will be | made to | contact us if me | dical | | | |
| an attention be | comes necessary. | | | | | | | |
| Signature of Da | rent (s)/ Guardians | | | Date | | | | |
| Signature of 1 d | TCTTC (3)/ Guardians | | | _ Dutc | | | | |

ATHLETE INFORMATION

| Allergies | | | | | | | |
|-------------------------------|----------------|--|--|--|--|--|--|
| Medication | | | | | | | |
| Other Medical Information | | | | | | | |
| | | | | | | | |
| INSURANCE COVERAGE (REQUIRED) | | | | | | | |
| Company Name | Policy Number_ | | | | | | |
| Insurance Company Phone N | | | | | | | |

Red Lodge International Ski and Snowboard Camp P.O. Box 2091 Red Lodge, MT 59068

redlodgeracecamp@yahoo.com 406-425-1171

| Name | Age | Date | | | | | | |
|--|---------------------|--------------|----------------|---|--|--|--|--|
| Address | City | | State | _ | | | | |
| Zip Phone | Email | | | _ | | | | |
| Circle One: Skier/Snowboarder ½ Day/Full Day Camp: | | | | | | | | |
| | Waiver and | | | | | | | |
| | | | | and/or snowboard activities. I should | | | | |
| | | | | ree to visually and physically inspect | | | | |
| the area and the adjacent area before using the area. I know that participating in any snowboarding and skiing event | | | | | | | | |
| is a dangerous activity. I accept such risk on behalf of myself and/or my minor child. KNOWING THESE FACTS, | | | | | | | | |
| and in consideration of the Red Lodge International Summer Race Camp accepting my entry, on behalf of myself and/or my minor child named on this registration, I EXPRESSLY ACKNOWLEDGE AND AGREE that | | | | | | | | |
| participating in this event is dangerous and involves the risk of serious injury and/or death. I, HEARBY, RELEASE, | | | | | | | | |
| | | | | mp, Inc., its shareholders, officers, | | | | |
| | | | | as well as any event sponsors, from | | | | |
| | | | | ure whatsoever arising out of or in the | | | | |
| | | | | hat the foregoing release, waiver, and he laws of the State of Montana and | | | | |
| | | | | | | | | |
| Wyoming and that if any portion thereof is held invalid, it is agreed that the balance shall notwithstanding, continue in full legal force and effect. I UNDERSTAND THAT this is a release of liability which will legally prevent me or | | | | | | | | |
| | | | | Lodge International Summer Race | | | | |
| Camp, Inc., its shareholders, officers, directors, and employees. I or my parent/guardian, nevertheless, enter into this | | | | | | | | |
| agreement freely and voluntarily and agree that it is binding upon me, my heirs, assigns and legal representatives. The undersigned further grants full permission to use any photographs, videotapes, motion pictures, recordings or | | | | | | | | |
| | | e any photog | raphs, videota | apes, motion pictures, recordings or | | | | |
| any other record of these even | • • • | | | | | | | |
| | | | | UVERS ARE OUTLAWED. | | | | |
| I have carefully read the | his Waiver and Rele | ease of Lia | bility, unde | rstand it, and accept its terms. | | | | |
| Participants Signature: | | | Γ | Date: | | | | |
| Parent/Guardian Signat | ture: | | D | Pate: | | | | |