



# 2009/2010 AVSC REGISTRATION FORM

phone: 205-5100 fax: 925-5290 www.teamavsc.com

Office Use Only	
PAYMENT AMT:	Scholarship App: Y/ N
DATE:	SKICO EMP: Y/ N

Participant(s) Name(s):	Date of Birth	Age	Sex	Grade	School

**Mailing Address:**  Mother  Father

Mother's Name: \_\_\_\_\_ Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_  
 (cell) \_\_\_\_\_ E-mail: \_\_\_\_\_

Mother's Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_  
 (cell) \_\_\_\_\_ E-mail: \_\_\_\_\_

Father's Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Emergency Contact (other than parents): \_\_\_\_\_ Phone:(h) \_\_\_\_\_ (w) \_\_\_\_\_

Family Physician: \_\_\_\_\_ Physician's phone: \_\_\_\_\_

**AVSC is a non-profit organization that annually fundraises 40% of our budget. To keep programs affordable, we price programs well below what we pay to provide them. Families who choose to pay the actual cost will receive a thank you letter acknowledging a tax-deductible contribution for the amount above the published price. The Actual AVSC Cost does not include the Work Deposit for Team programs.**

**PLEASE REFER TO THE PROGRAM GUIDE TO CHOOSE YOUR PROGRAM(S)**

Participant First Name	Ability Level #	Discipline: Alpine, Freestyle, Nordic or Snowboard	Program Name (day of week for NordWarriors)	Mountain	Work Deposit (Team Only)	Program Fee

**SUBTOTAL:**

I support the AVSC mission & would like to provide a scholarship for a child in need. My donation is:

**TOTAL ENROLLMENT FEE (Work Deposit + Program Fee + Donation):**

**METHOD OF PAYMENT (CIRCLE ONE):**    **MASTERCARD**                    **VISA**                    **CHECK**                    **CASH**

Name on Card: \_\_\_\_\_ Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_ CVC Three Digit Security Code: \_\_\_\_\_

**ASPENAUT (3 ½ through K) PARENTS ONLY: PLEASE COMPLETE THIS SECTION**

Name of Child	Child has skied before?	Child has taken organized ski lessons?	Child skis without assistance?	Child is comfortable on the chairlift?	Child is comfortable on which terrain? (Circle one)
	Yes / No	Yes / No	Yes / No	Yes / No	Green Blue Black
	Yes / No	Yes / No	Yes / No	Yes / No	Green Blue Black



# AVSC Ability Levels 2009/2010

## Skiing

### Level 1

I have never skied

### Level 2

I've just learned to make a beginner's turn. It's rough but I can manage. I feel ready to ride the chairlift.

### Level 3

I can link turns without stopping. I feel good on the chairlift and easy green terrain.

### Level 4

I'm keeping my skis parallel at the end of the turn with some skidding. I am comfortable on most green terrain and may be ready to try some easy blue runs.

### Level 5

My turns are rhythmic and my skis are usually parallel throughout the turn. I feel comfortable on all green and some blue runs.

### Level 6

I am confident on most groomed blue terrain and ready to explore some groomed blacks. My skis are always parallel.

### Level 7

I am making reliable linked parallel turns with my poles on all blue runs, but need work on controlling my speed. Black runs are okay when they are groomed.

### Level 8

I ski blue bumps and groomed blacks, but no double blacks (yet). I am linking short-radius turns in the fall line. I can ski advanced terrain on all four mountains.

### Level 9

Blacks are a piece of cake: I am working on tactics and lines in extreme terrain.

### Level 10

In your dreams! Please apply for a coaching position.

## Snowboard

### Level 1

I have never snowboarded.

### Level 2

I can slide across the hill both ways and stop. I'm starting to get the hang of this. I can ride a chairlift.

### Level 3

I can control my speed and direction while moving across the hill and am starting to turn.

### Level 4

I can turn in both directions and am starting to link my turns.

### Level 5

I am linking skidded turns while controlling my speed and starting to try blue terrain.

### Level 6

I am confident on most blue terrain under good conditions. I am beginning to carve my turns or ride switch (the opposite direction).

### Level 7

I am fine tuning dynamic turns and seek more challenging situations, including riding bumps, riding switch and dealing with varying snow conditions.

### Level 8

I am confident performing dynamic turns, riding switch and exploring techniques in all snow conditions, terrain, pipes and parks.

### Level 9

I can ride the entire mountain with confidence and ease. I am working on tactics and new moves in extreme terrain, pipes and parks.

### Level 10

Prove it! Then register for the January 2010 X-Games in Aspen.



## 2009/2010 AVSC ACKNOWLEDGMENT OF RISK

PARENT'S RELEASE OF LIABILITY AND INDEMNITY AGREEMENT

September 1, 2009 – August 31, 2010

**PLEASE READ CAREFULLY BEFORE SIGNING. THIS IS AN ACKNOWLEDGMENT OF RISK AND A RELEASE OF CERTAIN CLAIMS AND A WAIVER OF CERTAIN LEGAL RIGHTS.**

"PARENT" MEANS THE UNDERSIGNED PARENT OR LEGAL GUARDIAN SIGNING ON BEHALF OF HIM/HERSELF AND ON BEHALF OF THE MINOR CHILD ("CHILD") NAMED BELOW. "CLUB" MEANS THE ASPEN VALLEY SKI/SNOWBOARD CLUB. "ASPEN" MEANS THE ASPEN SKIING COMPANY, LLC, AND THE HINES HIGHLANDS LIMITED.

PARENT AND CHILD UNDERSTAND AND ACKNOWLEDGE THAT SKIING, SNOWBOARDING, AND PARTICIPATING IN VARIOUS PROGRAMS AND RELATED ACTIVITIES OF THE CLUB, INCLUDING BUT NOT LIMITED TO SKIING, SNOWBOARDING, TRAINING, COMPETITION, WORKING WITH COURSE-RELATED EQUIPMENT, USING CLUB FACILITIES AND TRAVEL ("CLUB ACTIVITY") AND THE USE OF SKI AREA FACILITIES CAN BE **HAZARDOUS, DANGEROUS, AND INVOLVE A RISK OF PHYSICAL INJURY OR DEATH.**

Parent and child acknowledge and understand that the child, as a "skier" under Colorado law, ASSUMES THE RISK of any injury resulting from any of the inherent dangers and risks of skiing. Parent and child understand that SAFETY is very important to the Club and participants in Club activities and acknowledge they have been given a copy of the Club's Participant Expectations which discusses the Colorado Ski Safety Act. Parent and Child understand that with respect to courses for competition and training for competition, Child is entitled and expected to conduct a reasonable visual inspection of the course prior to participating in the training or competition. Parent and Child agree and understand that the Child will be held to assume the risk of all course conditions, including, but not limited to, weather and snow conditions, course construction, layout and obstacles after Child performs the inspection. Parent understands and agrees that Child may ride ski lifts without being accompanied by an adult and Parent hereby gives permission for the Child to ride ski lifts without being accompanied by an adult.

### **PROVIDING MEDICAL INSURANCE FOR CHILD**

Parent warrants and represents that the Child is in good health and there are no special instructions regarding the Child which have not been listed on the registration form. Parent and Child acknowledge and agree that the Child has the physical dexterity and knowledge to safely load, ride and unload ski lifts. Parent has and agrees to maintain valid and sufficient medical and accident insurance for the Child throughout the time that the Child participates in any Club activities. The undersigned Parent understands that this is his/her sole responsibility, and **RELEASES** the Club and Aspen from any claim and/or responsibility for providing such coverage for the Child.

### **MEDICAL CARE, TRANSPORTATION**

Parent authorizes the Club and the Aspen Skiing Company and the operator of any other ski area where a Child may participate in a Club activity and their authorized personnel to obtain medical care for the Child or to transport the Child to a medical facility or hospital if, in the opinion of such personnel, medical attention is needed. Parent agrees that upon the Child's transport to any such medical facility or hospital that the Released Parties shall not have any further responsibility to the undersigned Parent or Child. Further, the Parent agrees to pay all costs associated with such medical care and related transportation provided for the Child and agrees to indemnify and hold harmless the Released Parties from any costs or claims arising from such medical care and related transportation.

### **RELEASE OF CHILD'S RIGHTS**

The undersigned Parent **HEREBY COMPLETELY RELEASES AND HOLDS HARMLESS** the Club, Aspen, the Aspen Winter Sports Foundation, the FiveTrees Metropolitan District, the United States Forest Service, and their subsidiaries, representatives, agents, affiliates, officers, directors, shareholders, parent companies,

servants, employees and volunteers (collectively the "Released Parties") from **ANY AND ALL CLAIMS OF ANY NATURE OR ANY KIND FOR INJURY, OR DEATH** to Child or Child's property that may be sustained in connection with Club Activity, **INCLUDING ANY INJURY, DEATH OR DAMAGE THAT RESULTS FROM NEGLIGENCE** of the Released Parties. The undersigned Parent understands that if Child is injured or killed, or property of Child is damaged in connection with Club Activity, that neither Parent nor Child has a right to make a claim or file a lawsuit against any of the Released Parties, in accordance with CRS 13-22-107. The undersigned Parent further **AGREES TO DEFEND AND INDEMNIFY AND HOLD HARMLESS** the Released Parties from any and all claims brought by third parties which arise in whole or in part from the Child's participation in any Club Activity.

**RELEASE OF PARENTS' RIGHTS**

The undersigned Parent **ALSO COMPLETELY RELEASES AND HOLDS HARMLESS** the Club, Aspen, the Aspen Winter Sports Foundation, the FiveTrees Metropolitan District, the United States Forest Service, and their subsidiaries, representatives, agents, affiliates, officers, directors, shareholders, parent companies, servants, employees and volunteers (collectively the "Released Parties") from **ANY AND ALL CLAIMS OF ANY NATURE FOR ANY KIND OF INJURY, OR DEATH** to Parent or Parent's property that may be sustained in connection with Club Activity, **INCLUDING ANY INJURY, DEATH OR DAMAGE THAT RESULTS FROM NEGLIGENCE** of the Released Parties. The undersigned Parent understands that if Parent is injured or killed, or property of Parent is damaged in connection with Club Activity, that Parent has no right to make a claim or file a lawsuit against any of the Released Parties.

Parent and Child agree that they will accept and abide by the rules and regulations of the Aspen Valley Ski/Snowboard Club and the Aspen Skiing Company and any other rules or regulations imposed by the organizers of any particular event in which Parent and/or Child participate.

In consideration of engaging in Club Activities and using the ski areas of the Aspen Skiing Company, PARENT, on behalf of him/herself and his/her Child, agrees that all claims for injury and/or death for Parent or Child shall be GOVERNED BY THE LAW OF THE STATE OF COLORADO AND EXCLUSIVE JURISDICTION for any such claim shall be in County or District Court of Pitkin County, Colorado.

This Agreement shall be binding to the fullest extent permitted by law. If any provision of this Agreement is found to be unenforceable, the remaining terms shall be enforceable. The undersigned Parent or legal guardian acknowledges that he/she is signing this Agreement on behalf him/herself and on behalf of the Child, who is a minor, and that the Child is bound by all the terms of this Agreement. This Agreement shall be binding upon the Parent's and Child's assignees, subrogors, distributors, heirs, next of kin, executors and personal representatives.

**WE HAVE CAREFULLY READ THIS AGREEMENT, UNDERSTAND ITS CONTENTS AND SIGN IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.**

**Please list special medical needs & allergies of all children:**

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Print Name of Child(ren)

Signature of Parent or Legal Guardian

Print Name of Parent or Legal Guardian

Date



## 2009/2010 AVSC SCHOLARSHIP PROGRAM OVERVIEW

**PLEASE TAKE THE TIME TO CAREFULLY READ AND UNDERSTAND THE CRITERIA REQUIRED FOR CONSIDERATION.**

The Aspen Valley Ski/Snowboard Club exists to enrich the lives of our participants and strengthen the community fabric of the Roaring Fork Valley. We offer premier instruction in skiing and snowboarding, and emphasize the values of commitment, teamwork and integrity. We help shape the character of our youth, and every child and young adult interested should be able to take advantage of the opportunities we provide, regardless of their financial situation. Because our funds are limited, scholarship assistance will be contingent upon financial need. Please understand that all AVSC participants receive a form of financial aid since program fees represent only 60% of the true cost of providing these programs.

**Scholarships are not available for the Aspenauts, Bighorns, SnoBandits or Cross-Over programs.**

Base Camp participants (*SnoWarriors, All Mountain, NordWarriors, Nordic Combined, Ridge Runners, Ridge Riders*) are eligible for up to the total cost of program fees less \$75. Competitive program applicants are eligible for up to 50% of program fees. In special circumstances, we may be able to offer more than 50%. Scholarship applicants should also thoroughly understand the conditions that accompany the receipt of an award.

### **SCHOLARSHIP AWARDS CRITERIA**

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- Financial need based on 2008 tax return. Two-parent households filing separate returns must attach 2008 tax returns from both individuals.
- Explanatory letter.
- Availability of funds.

### **CONDITIONS FOR SCHOLARSHIP AWARDS**

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All participants receiving a scholarship must meet the following conditions. Failure to meet these requirements will result in the forfeiture of the scholarship award.

- Recipient must abide by the AVSC Code of Conduct.
- Disciplinary actions within AVSC, school or with the local authorities may revoke award.
- All recipients will be required to write a letter of thanks on behalf of the AVSC.
- A copy of the letter of thanks must be sent to AVSC.

### **QUESTIONS**

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If you have questions, please contact your child's program director:

Base Camp	Madeleine Hawken	205-5160	mhawken@teamavsc.org
Alpine	Jeff Kai	205-5110	jkai@teamavsc.org
Freestyle	Eric Knight	205-5130	eknight@teamavsc.org
Nordic	John Callahan	205-5140	jcallahan@teamavsc.org
Snowboard	Miah Wheeler	205-5150	mwheeler@teamavsc.org

### **CONFIDENTIALITY STATEMENT**

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All information provided will be kept confidential.



# 2009/2010 AVSC SCHOLARSHIP APPLICATION FORM

Please mail to: Mark Cole, AVSC, P.O. Box C-3, Aspen, CO 81612

## COMPLETED SCHOLARSHIP APPLICATION INCLUDES

1. Registration Form
2. Scholarship Application Form - Only one form is required per family.
3. 2008 Tax Returns
4. Explanatory Letter - On a separate sheet, please state why you are requesting a scholarship. Include comments on any special circumstances influencing your financial position which AVSC should consider in the decision making process.
5. Partial Payment - If you do not receive a scholarship this payment will be applied towards program fees.

**Base Camp Programs – must include \$75 payment per child to be considered.**

**Devo Programs – must include \$500 partial payment per athlete.**

**Team Programs – must include \$700 partial payment per athlete.**

## SCHOLARSHIP DEADLINES

September 4, 2009 - Deadline for all Team AVSC Competitive Programs

October 1, 2009 - Deadline for all AVSC Development (Devo) Programs

October 30, 2009 - Deadline for Base Camp Programs (*SnoWarriors, All Mountain, NordWarriors, Nordic Combined, Ridge Runners, Ridge Riders*) **Scholarships are not available for the Aspenauts, Bighorns, SnoBandits or Cross-Over programs.**

## EQUIPMENT SCHOLARSHIPS

Please check, if you would like to be considered for **free ski equipment** from Gorsuch Ltd.

Please check, if you would like to be considered for **free snowboarding equipment**.

*You may list all participants and total amount requested on the same scholarship form.*

Participant's Name: \_\_\_\_\_ Program: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Program: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Program: \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\$ \_\_\_\_\_ Total Program Fee(s) for which scholarship is requested

\$ \_\_\_\_\_ Total Amount requested

\$ \_\_\_\_\_ Partial Payment enclosed with application

I hereby acknowledge that the information on this application is true and accurate. I understand that if any information on this application form is not true or accurate, then AVSC has the right to terminate any scholarship award. At such time the applicant will be obligated to repay the AVSC the total amount of the scholarship awarded. AVSC also has the right to terminate any scholarship award should the balance of the program fee, after scholarship, not be paid within the designated time. I have read and understand all my obligations and responsibilities as a scholarship applicant/recipient.

Parent Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only  Registration Form  Tax Returns  Explanatory Letter  Partial Payment Program \_\_\_\_\_