

**ALPINE CANADA ALPIN
MEMBERSHIP REGISTRATION FORM
2018-2019 SEASON**



A. PERSONAL INFORMATION

SURNAME	FIRST NAME	SEX	DATE OF BIRTH (DD/MM/YYYY)
MAILING ADDRESS	CITY	PROV	POSTAL CODE
HOME PHONE	CELL PHONE	EMAIL	MEMBERS HEALTH CARD NUMBER
PREFERRED LANGUAGE (CIRCLE ONE)	ENGLISH	FRENCH	
EMERGENCY CONTACT	RELATION	PHONE	

IF UNDER 18 YEARS OF AGE:

PARENT/GUARDIAN NAME	PHONE NUMBER	EMAIL ADDRESS
ABORIGINAL ANCESTORY (CIRCLE IF APPLICABLE)	STATUS/TREATY	METIS INUIT NON-STATUS

B. PROGRAM INFORMATION

PTSO _____ CLUB NAME _____

SELECT ALL BOXES THAT APPLY TO YOUR PROGRAM THIS SEASON

<p>DISCIPLINE</p> <p><input type="checkbox"/> ALPINE</p> <p><input type="checkbox"/> SKI CROSS</p> <p><input type="checkbox"/> PARA-ALPINE</p>	<p>CLASS</p> <p>NON-COMP</p> <p><input type="checkbox"/> GENERAL MEMBER</p> <p><input type="checkbox"/> COACH</p> <p><input type="checkbox"/> OFFICIAL</p> <p><input type="checkbox"/> VOLUNTEER</p> <p>COMPETITIVE</p> <p><input type="checkbox"/> ENTRY LEVEL</p> <p><input type="checkbox"/> RECREATION</p> <p><input type="checkbox"/> NATIONAL</p> <p><input type="checkbox"/> NATIONAL WITH SAIP CLASS 2</p> <p><input type="checkbox"/> NATIONAL WITH SAIP CLASS 3</p> <p><input type="checkbox"/> MASTERS NATIONAL</p> <p><input type="checkbox"/> MASTERS NATIONAL WITH SAIP CLASS 2</p> <p><input type="checkbox"/> MASTERS NATIONAL WITH SAIP CLASS 3</p> <p><input type="checkbox"/> MASTERS-WEEKEND PASS</p>	<p>INTERNATIONAL CARDS</p> <p>1ST CARD</p> <p><input type="checkbox"/> FIS PROVINCIAL SX or ALP</p> <p><input type="checkbox"/> FIS CANADA SX or ALP</p> <p><input type="checkbox"/> FIS INTERNATIONAL SX or ALP</p> <p><input type="checkbox"/> FIS MASTERS</p> <p><input type="checkbox"/> IPC CANADA</p> <p><input type="checkbox"/> IPC INTERNATIONAL</p> <p>2ND CARD</p> <p><input type="checkbox"/> FIS PROVINCIAL SX or ALP</p> <p><input type="checkbox"/> FIS CANADA SX or ALP</p> <p><input type="checkbox"/> FIS INTERNATIONAL SX or ALP</p> <p align="right">Please circle appropriate discipline</p>
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RETURNING ATHLETES PLEASE LIST YOUR APPLICABLE LICENCE NUMBERS BELOW:

NATIONAL CARD NO	FIS CARD NO (ALP)	FIS CARD NO (SX)	IPC LICENSE NO
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C. CONSENT

I HAVE READ AND UNDERSTAND THIS RELEASE OR LIABILITY AND INDEMNIFICATION AGREEMENT ON THE REVERSE PRIOR TO SIGNING IT AND I AM AWARE THAT BY SIGNING THIS RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT-OF-KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES. *IN SIGNING THIS CONSENT/RELEASE I AGREE TO THE FOLLOWING: ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES. IN SIGNING THIS CONSENT/RELEASE I AGREE TO THE FOLLOWING:*

A) AUTHORIZE ACA/PSO AND/OR CLUB TO USE MY PHOTOGRAPH, IMAGE AND LIKENESS ("MY IMAGE") IN ALL FORMS AND MANNER INCLUDING BUT NOT LIMITED TO PUBLICATION ON INTERNET WEBSITES, BROADCAST, AND ANY OTHER PUBLICATIONS AS RELEASED TO OR BY ACA, FOR THE PROMOTION OF SKIING.

B) COLLECTION AND USE OF ALL PERSONAL INFORMATION BY ACA PURSUANT TO ACA'S PRIVACY POLICY, WHICH IS LOCATED ON ACA'S WEBSITE (WWW.ALPINECANADA.ORG)

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

PARTICIPANT: I AM AWARE THAT SKIING INVOLVES CERTAIN DANGER AND RISKS, INCLUDING, BUT NOT LIMITED TO COLLISION WITH NATURAL AND MAN-MADE OBJECTS AND WITH OTHER SKIERS AND SPECTATORS AND FALLING AT HIGH SPEED WHILE RACING OR TRAINING AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH DANGERS AND RISKS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM.

IN CONSIDERATION OF ALPINE CANADA ALPIN (A.C.A.) AND THE CANADIAN SNOWSPORTS ASSOCIATION (THE C.S.A.) ACCEPTING MY APPLICATION FOR REGISTRATION AND PERMITTING ME TO PARTICIPATE IN COMPETITIONS, EVENTS OR TRAINING AUTHORIZED OR SANCTIONED BY A.C.A. AND THE C.S.A., I HEREBY FOR MYSELF MY HEIRS, NEXT-OF-KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS, HEREBY AGREE AS FOLLOWS:

1. TO WAIVE ANY AND ALL CLAIMS THAT I MAY HAVE AGAINST A.C.A., THE C.S.A., THE SKI CLUB, ZONE OR DIVISION NAMED IN SECTION ON THE REVERSE. ANY OTHER SKI CLUB OR SKI AREA CONNECTED WITH SUCH COMPETITIONS, EVENTS, TRAINING AND THEIR DIRECTORS, OFFICERS, COACHES, EMPLOYEES, REPRESENTATIVES, OFFICIALS, AGENTS, VOLUNTEERS AND SPONSORS (ALL OF WHOM ARE HEREINAFTER COLLECTIVELY REFERRED TO AS THE RELEASEES).
2. TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, INJURY OR EXPENSE THAT I MAY SUFFER OR THAT MY NEXT-OF-KIN MAY SUFFER AS A RESULT OF MY PARTICIPATION IN THE SAID COMPETITIONS, EVENTS OR TRAINING DUE TO ANY CAUSE, WHATSOEVER, INCLUDING NEGLIGENCE ON THE PART OF THE RELEASEES.
3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY PROPERTY DAMAGE, PERSONAL INJURY OR DEATH TO ANY THIRD PARTY RESULTING FROM MY PARTICIPATION IN THE SAID COMPETITIONS EVENTS OR TRAINING.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

I FULLY RECOGNIZE AND AGREE THAT THE PROVINCIAL FIS LICENCE GRANTED TO ME BY ACA IS A LICENCE RESTRICTED TO ENTRY INTO FIS RACES WITHIN MY HOME PROVINCE ONLY.

I FURTHER ACKNOWLEDGE THAT I HAVE DECLINED TO PARTICIPATE IN THE CSA/ACA OUT OF COUNTRY SPORT ACCIDENT INSURANCE PROGRAM(SAIP) AND THAT I AM FULLY RESPONSIBLE FOR THE PAYMENT OF ANY ACCIDENT, MEDICAL, MOUNTAIN RESCUE OR EVACUATION COSTS THAT I MAY INCUR WHILE TRAINING OR COMPETING OUTSIDE OF MY HOME PROVINCE.

FURTHERMORE, I AGREE THAT I WILL HOLD THE CSA/ACA AND THE PROVINCE OF REGISTRATION HARMLESS FROM ANY COSTS THAT MAY BE INVOICED OR ASSESSED AGAINST THEM BY ANY SERVICE PROVIDER ASSOCIATED WITH ANY INJURY ARISING OUT OF TRAINING OR COMPETING OUTSIDE MY HOME PROVINCE.

THAT THIS AGREEMENT SHALL BE GOVERNED BY AND INTERPRETED IN ACCORDANCE WITH THE LAWS OF ATHLETES HOME PROVINCE; AND THAT ANY LITIGATION INVOLVING THE PARTIES OF THIS AGREEMENT SHALL BE BROUGHT WITHIN THE LAWS OF THE ATHLETES HOME PROVINCE

RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT (IF COMPETITOR UNDER 18 YEARS OF AGE)

PARENT / GUARDIAN: I HAVE READ AND UNDERSTAND THE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT SET OUT ABOVE IN CONSIDERATION OF ALPINE CANADA ALPIN (A.C.A.) AND THE CANADIAN SNOWSPORTS ASSOCIATION, (C.S.A.) ACCEPTING THE APPLICATION FOR REGISTRATION OF:

(HEREAFTER REFERRED TO AS "THE COMPETITOR") AND PERMITTING THE COMPETITOR TO PARTICIPATE TO COMPETITONS, EVENTS OR TRAINING AUTHORIZED OR SANCTIONED BY A.C.A. AND THE C.S.A.. I HEREBY FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS AS FOLLOWS:

1. TO WAIVE ANY AND ALL CLAIMS THAT I MAY HAVE AGAINST A.C.A., THE C. S. A., THE SKI CLUB, ZONE OR DIVISION NAMED IN SECTION A ABOVE, ANY OTHER SKI CLUB OR SKI AREA CONNECTED WITH SUCH COMPETITIONS, EVENTS, TRAINING AND THEIR DIRECTORS, OFFICERS, COACHES, EMPLOYEES, REPRESENTATIVES, OFFICIALS, AGENTS, VOLUNTEERS AND SPONSORS (ALL OF WHOM ARE HEREINAFTER COLLECTIVELY REFERRED TO AS THE RELEASEES.)
2. TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE INJURY OR EXPENSE THAT I MAY SUFFER OR THAT MY NEXT-OF-KIN MAY SUFFER AS A RESULT OF MY OR THE COMPETITOR'S PARTICIPATION IN THE SAID COMPETITIONS, EVENTS TRAINING DUE TO ANY CAUSE WHATSOEVER INCLUDING ANY NEGLIGENCE ON THE PART OF THE RELEASEES.
3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY PROPERTY, DAMAGE, PERSONAL INJURY OR DEATH SUSTAINED BY THE COMPETITOR OR BY ANY THIRD PART RESULTING FROM THE COMPETITOR'S PARTICIPATION IN THE SAID COMPETITIONS, EVENTS OR TRAINING.

PARTICIPANTS SIGNATURE

DATE

SIGNATURE OF PARENT OF GUARDIAN (IF UNDER 18) DATE

NAME OF WITNESS

DATE

SIGNATURE OF WITNESS

DATE