



# NRM Fall Fest Registration

Dec 11-13, 2009 • Big Sky, MT

Registration Deadline Nov. 27, 2009 • Payment must accompany registration

Mail to the NRM Office P.O. Box 11392, Bozeman, MT 59719



## CONTACT INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

DOB (if minor) \_\_\_\_\_

Phone - home (\_\_\_\_\_) \_\_\_\_\_

Phone - cell (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Snowsports School \_\_\_\_\_

## DIVISION

NRM  A  C  E  I  NI  NW  RM  W

## CURRENT DISCIPLINE AND LEVEL OF CERTIFICATION

(check all that apply)

ALPINE  L1  L2  L3

SNOWBOARD  L1  L2  L3

CROSS COUNTRY  L1  L2  L3

TELEMARK  L1  L2  L3

ADAPTIVE  L1  L2  L3

Special Needs: \_\_\_\_\_

## EXTRA TICKETS

One ticket for each Friday Night Movie & Popcorn ("STEEP - the story of big mountain skiing) plus Saturday Happy Hour & Silent Auction are included with Fall Fest registration. Need extra tickets for friends and family?

EXTRA Ticket for Friday Night Movie and Popcorn  
Quantity \_\_\_\_\_ @ \$10 each = \$ \_\_\_\_\_

EXTRA Ticket for Saturday Happy Hour  
Quantity \_\_\_\_\_ @ \$15 each = \$ \_\_\_\_\_

Donation to the PSIA-NRM Education Foundation: \$ \_\_\_\_\_

Check if you'd like to remain anonymous

Check if you'd like to dedicate your donation to:  
\_\_\_\_\_

## PAYMENT INFORMATION

Total amount enclosed: \$ \_\_\_\_\_

CHECK  VISA  MC  AMEX

Credit card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CV Code: \_\_\_\_\_

Name on card: \_\_\_\_\_

Zip code of billing address: \_\_\_\_\_

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

NOTE: Credit card information is destroyed after being charged.

## FALL FEST REGISTRATION: \$125

(after Nov. 27 \$175)  
Includes Saturday and Sunday clinics plus evening social events.  
(NOTE: The ACE is Fri-Sat only. Avalanche 1 is Fri-Sun and extra fee.)  
Lift tickets are not included. Discounted lift tickets and lodging are available through Big Sky Resort 800.548.4486 or 406.995.5750

**CLINIC SELECTION** - Indicate 1st and 2nd choices

## PRE-FALL FEST CLINICS (FRI)

- Masters Clinic (Alpine Level 2 and up) \$65
- Advanced Educator (Alpine Level 3 only) \$65
- Alpine Train the Trainer - \*Free!
- Snowboard Train the Trainer - \*Free!

\*Free to one trainer per member school (lift ticket not included)

## MULTI-DISCIPLINE

- Avalanche Level I (FRI-SUN) additional fee, add \$60 to Fall Fest registration
- ACE (FRI - SAT of Fall Fest, SUN clinic not included)
- Adaptive - Helping Special Needs Students (SAT-SUN)
- Adaptive - Teaching Special Needs Students - 3T/4T,VI,Cog/DD (SAT)
- Adaptive - Teaching Special Needs Students - 3T/4T,VI,Cog/DD (SUN)

## ALPINE

- So you want to be a Ski Instructor (SAT - SUN)
- Biomechanics of the Foot and Ankle (SAT)
- "Femme Fatal" The Woman's Clinic (SAT- intermediate)
- "Femme Fatal" The Woman's Clinic (SUN - advanced)
- Off Piste Got You Piste Off? (SAT - advanced)
- Off Piste Got You Piste Off? (SUN - intermediate)
- Movie Star - Video Clinic (SAT)
- Movie Star - Video Clinic (SUN)
- Why Change? Movement Analysis (SAT)
- Why Change? Movement Analysis (SUN)
- Ski Lesson - Ski with a DCE Staff Member (SUN)
- Level 2 Head Start (SUN)
- Level 3 Head Start (SUN)
- Teaching Old Dogs, New Tricks - Teaching Seniors (SUN)

## SNOWBOARD

- So you want to be a Snowboard Instructor (SAT-SUN)
- Level 1 (SAT-SUN)
- Level 2 Prep Clinic (SAT-SUN)
- Level 3 Prep Clinic (SAT-SUN)
- Freestyle Jam (SAT)
- Freestyle Jam (SUN)
- Creative Teaching (SAT)
- Creative Teaching (SUN)
- All the Mountain Exploitation (SAT)
- All the Mountain Exploitation (SUN)

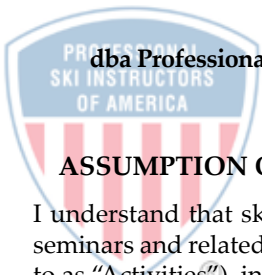
## NORDIC

- Bust the Tele Rust - Ski with D-Team member Tom Marshall (SAT)
- Bust the Tele Rust - Ski with D-Team member Tom Marshall (SUN)
- Telemark Level 1 (SAT - SUN)
- NW Yellowstone Ski (SAT)
- Skate Ski Clinic at Lone Mountain Ranch (SUN)

**PHOTO RELEASE:** I understand that during the event video or still images may be taken. By signing below, I give PSIA/AASI-NRM permission to use these images in a professional manner in member publications and education material.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_

(don't forget page 2 - it must be signed and included with the application)

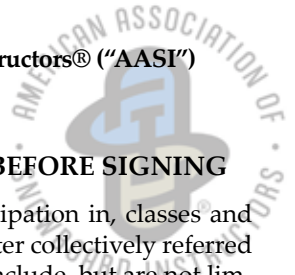


AMERICAN SNOWSPORTS EDUCATION ASSOCIATION, INC.

dba Professional Ski Instructors of America® ("PSIA") and/or American Association of Snowboard Instructors® ("AASI")

and

ASEA EDUCATION FOUNDATION



ASSUMPTION OF RISK AND RELEASE OF LIABILITY AGREEMENT - READ CAREFULLY BEFORE SIGNING

I understand that skiing and snowboarding in their various forms, as well as preparation for and participation in, classes and seminars and related activities in alpine, nordic, freestyle, and disabled skiing and snowboarding (hereinafter collectively referred to as "Activities"), involve many RISKS, DANGERS and HAZARDS. These risks, dangers and hazards include, but are not limited to: changing weather and snow conditions, variations in steepness or terrain, natural and man-made objects and structures, equipment failure, collisions with objects, structures, or other skiers/riders, and exceeding one's own abilities. I further understand that ski and snowboard training and clinics may be more hazardous than recreational skiing and snowboarding. I understand that INJURIES OF ALL TYPES ARE A COMMON AND ORDINARY OCCURRENCE OF THE ACTIVITIES. I know and accept that the risk of SEVERE INJURY and even DEATH exists in all these Activities. I also know and accept that training, coaching, instruction, and supervision by the American Snowsports Education Association, Inc., the ASEA Education Foundation, their affiliated ski and snowboard facility operators, and their divisions, subsidiaries, affiliates, officers, directors, volunteers, Participants, employees, contractors and agents (hereinafter the term "PSIA-AASI" shall be used to refer to all such persons and entities collectively) does not and cannot guarantee my safety. I FREELY AND VOLUNTARILY ACCEPT AND FULLY ASSUME THE RISK THAT I MAY SUFFER TEMPORARY, PERMANENT OR EVEN FATAL INJURIES, even if I follow the instructions or advice of PSIA-AASI. Nevertheless, I, the undersigned (hereinafter "Participant") agree to comply with and be bound by the following terms at all times while attending or participating in any PSIA-AASI event or program.

- 1. Participant hereby unconditionally WAIVES AND RELEASES ANY AND ALL CLAIMS OF LEGAL LIABILITY AGAINST PSIA-AASI, AND AGREES TO DEFEND, INDEMNIFY AND HOLD PSIA-AASI HARMLESS FROM ANY CLAIMS, present or future, brought by Participant or Participant's heirs, executors, administrators or assigns, FOR ANY LOSS, DAMAGE, EXPENSE, OR INJURY INCLUDING DEATH, suffered by Participant in any Activities in which PSIA-AASI is involved in any way, due to any cause whatsoever, INCLUDING CLAIMS OF NEGLIGENCE and/or breach of express or implied warranty by PSIA-AASI.
2. Participant authorizes PSIA-AASI to obtain medical care for, or to transport Participant to a medical facility or hospital if, in the opinion of PSIAAASI, medical attention is required and Participant is unable to make such decisions for himself/herself. Participant agrees to pay all costs associated with such medical care and related transportation and shall defend, indemnify and hold PSIA-AASI harmless from the consequences of such decision and from any such costs incurred relating to the provision of medical care. Participant also authorizes disclosure of protected medical information necessary to provide, coordinate or manage Participant's healthcare.
3. This Agreement shall be construed in accordance with, and governed by the substantive laws of the State of Colorado, without reference to principles governing choice or conflicts of laws. In addition, Participant agrees that all lawsuits for personal injury, death or property damage against PSIA-AASI must be brought in the state or federal courts of Colorado, Michigan or New Hampshire.
4. In the event any part of this Liability Release is found to be unenforceable, the remaining terms shall be given full force and effect to the greatest extent allowed by law.

HAVING CAREFULLY READ THE FOREGOING AND UNDERSTANDING IT TO BE A LEGALLY BINDING LIABILITY RELEASE AND INDEMNITY AGREEMENT, PARTICIPANT SIGNIFIES HIS/HER ASSENT TO THE ABOVE TERMS BY SIGNING BELOW:

PARTICIPANT (IF OVER AGE 18)

Signature: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Printed name: \_\_\_\_\_ Date Signed: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN REQUIRED FOR PARTICIPANTS UNDER THE AGE OF 18

As the parent or guardian of the minor child Participant named below, I hereby enter into each and every agreement, representation, waiver and liability release described above on behalf of myself, the Participant, and any other parent or guardian of the Participant, intending that they be binding on me, the Participant, and our respective heirs, executors, administrators and assigns. By my signature below I represent that I intend to waive and release the right of the Participant, and the right of any other parent or guardian of the Participant to maintain any claim or suit against PSIA-AASI arising out of the Participant's participation in any Activities involving PSIA-AASI in any way including claims or suits for NEGLIGENCE. I further agree to defend, indemnify and hold PSIAAASI harmless from any claims from third parties arising from the minor child Participants' participation in any Activities involving PSIA-AASI.

Parent or guardian's signature \_\_\_\_\_

Printed name \_\_\_\_\_ Date \_\_\_\_\_

Participant's Name (Please Print) \_\_\_\_\_