



PSIA/AASI - NRM

Iron Jam Session event admin form



406-581-6139

director@psia-nrm.org

www.psia-nrm.org

Snowsport School _____ Clinician _____

Start Date _____ End Date _____

Participant's name	PSIA/AASI member #	Signed Liab Release Y/N	Paid \$40 event fee Y/N
1			
2			
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