



# PSIA/AASI - NRM

## Traveling Nordic Series 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	Comments
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
18			
20			

