

ALPINE SKIING ENTRY FORM

SCHOOL/AGENCY _____ COACH _____

Phone _____ Fax _____ E-mail _____

First Name	Last Name	Age	Sex	Shoe Size	Weight	Height	Ability Level *

CHAPERONES: (ONE CHAPERONE FOR EVERY THREE ATHLETES):

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

*BEGINNER, INTERMEDIATE, ADVANCED