THUNDER RIDGE RACE TEAM REGISTRATION FORM

2012-2013 SEASON

Primary Race Team Information email contact_____

Racer's Name _____DOB _____Age _____Sex _____

Street _____ City _____ State_____

Zip _____ Phone _____Email _____

School Attending _____

Clubs or activities:_____

Parent Information

Father's Name _____

Address_____

Phone _____Email_____

Father's Employer _____Occupation_____

Address_____

Bus. Phone _____Cell Phone _____

Mother's Name _____

Address_____

Phone_____Email_____

Mother's Employer _____Occupation_____

Address_____

Bus. Phone _____ Cell Phone _____

Insurance Carrier _____ Policy No. _____

	Payment by November 4th	**Payment after November 4th**	**Level (please circle)**
Race Team Coaching Fee	**$675**	**$725**	**U21/U18/U16/U14/U12/U10**
Developmental Team Coaching Fee	**$525**	**$575**	**Devo**

Deduct $25 from each **additional** child's coaching fee.

Paid: CA/CK/V/MC/AX/D _____

Exp. Date _____CID #_____Check #_____ Date_____

Thunder Ridge Ski Area – Race Team

P.O. Box 627, 137 Birch Hill Road, Patterson, New York 12563
www.thunderridgeski.com - Phone: 845-878-4100 - Fax: 845-878-2279
email: mdidio@thunderridgeski.com