

**National Ability Center
Ski/Snowboard Registration Form for 2009-2010 season**



Participant's Name _____ Age: _____
 Phone(s): _____ Disability: _____
 Parent/Guardian _____ Email: _____
 Ski/Snowboard: _____
 If returning, what equipment would you desire? _____

PLEASE INDICATE YOUR 1ST, 2ND, AND 3RD CHOICE TIMES by marking 1, 2 or 3 in the desired time slot for each session. We will do our best to accommodate your 1st or 2nd choices.

If you want to participate in TWO sessions please sign up for Session I and your choice of Session II or III. If slots are available, we will allow for participation in all three sessions. Please indicate your session preference with a 1, 2 or 3 next to the date.

Session I –November 30-December 20 Prices: Group session \$80, Private session \$90

| Privates | | | | | Group Private | |
|-------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| <input type="checkbox"/> 9:00-11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 |
| <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 |
| <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 |

\$ _____

Session II- January 9- February 12 Prices: Group session \$135, Private session \$150

| Privates | | | | | Group Private | |
|-------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| <input type="checkbox"/> 9:00-11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 |
| <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 |
| <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 |

\$ _____

Session III- February 28-April 3 Prices: Group session \$135, Private session \$150

| Privates | | | | | Group Private | |
|-------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| <input type="checkbox"/> 9:00-11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 | <input type="checkbox"/> 9:00 -11:00 |
| <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 | <input type="checkbox"/> 11:45-1:45 |
| <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 | <input type="checkbox"/> 2:00-4:00 |

\$ _____

Payment is expected with this registration form in order to be granted your lesson requests. Please include a check when mailing this form or complete the credit card information below. Thank you for your support. Donation \$ _____

Credit Card #: _____ Exp: _____ Total \$ _____

Our fees cover only 30% of the program costs. If you would like to contribute, we welcome any size donation.