

KNTA TRAIL PASS & MEMBERSHIP FORM

2008-2009 Season

Please Print Clearly and Fill in information for each family member. All information is required for insurance purposes.

Name of Skier	Male/ Female	DOB	Mailing Address	Phone Number	E-mail Address	*Competitive or Recreational	Member of Jackrabbit Program Y/N ?

***Competitive indicates that the skier may participate in one or more races in the Manitoba ski circuit.**

KNTA USE ONLY

FEES: \$70 INDIVIDUAL OR \$125 FAMILY. Each person listed will have an individual Trail Pass Tag.

Payment Received: cheque no. _____ or cash received _____

Sold by: _____ Date: _____

KNTA DB LSSD DB CCSAM DB CARD MADE

CLUB INDEMNITY AND RELEASE OF LIABILITY

In consideration of Cross Country Canada, Lake Superior Ski Division, Cross Country Ski Association of Manitoba and Kenora Nordic Trails Association and Mt. Evergreen Ski Club's acceptance of me as a member of the Association, and my being permitted to partake in the Association's events, activities and games, I hereby, for me, my heirs, executors and assigns, forever release, discharge and hold harmless Cross Country Canada, Lake Superior Ski Division, Cross Country Ski Association of Manitoba, Kenora Nordic Trails Association and Mt. Evergreen Ski Club, its Directors, Officers, employees, representatives or agents.

I have read this release and accept its terms.

Signature: _____ **Date:** _____

Witness: _____ **Date:** _____