

Minneapolis Alpine Ski Team Registration

Date _____

Racer Information

	First	Last
Name		

Mpls Schools Identification Number: _____

Male (M) /Female (F)		Grade		Skiing Experience	
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Birthdate _____ / _____ / _____
month day year

R = have raced regularly before
 3 = advanced skier
 2 = intermediate skier
 1 = beginning skier
 N = never skied before

Your School _____

If In Grade 7 or 8, In Which High School's Attendance Area Do You Live: _____

Racer's Primary Address & Contact Information

Street/Apt No. _____

(more space, if needed) _____

City _____ Zip Code _____

Home Phone (____)-____-____ Cell (____)-____-____

Racer Email Address _____
 (please write extra clearly, with correct punctuation marks)

Parents' Info

Father (or guardian)

Mother (or guardian)

	Father (or guardian)	Mother (or guardian)
First Name		
Last Name		

Father (or guardian)

Mother (or guardian)

	Yes / No (Circle one)	Yes / No (Circle one)
Same address as racer?		
IF NO: please provide second address on back, including home phone #		

	(____)-____-____	(____)-____-____
Home Phone*		

	(____)-____-____	(____)-____-____
Cell Phone		

	(____)-____-____	(____)-____-____
Work Phone		

Father's Email Address: (Most Used) _____

Mother's Email Address: (Most Used) _____

*if different from racer # above