

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)

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*	(____)-____-____	(____)-____-____
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Cell Phone	(____)-____-____	(____)-____-____
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Work Phone	(____)-____-____	(____)-____-____
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Father's Email Address: (Most Used) _____

Mother's Email Address: (Most Used) _____

*if different from racer # above