



**BEAVERLAND MUST-SKIS PARTICIPANT
REGISTRATION AND WORK CREDIT COMMITMENT FORM**

PARTICIPANT (Last, First, MI) _____

AGE _____ BIRTHDATE _____ SEX _____

STREET _____ CITY _____ STATE _____ ZIP _____

PARENT/GUARDIAN: _____

Home # _____ Work # _____ Cell # _____

PHYSICIAN _____ INSURANCE _____ POLICY# _____

ALLERGIES _____

E-MAIL (required) _____

MEMBERSHIP TYPE: SKIING _____ (complete work credits section below) NON-SKIING _____

BY SIGNING BELOW, I acknowledge reading, understanding and accepting the statements herein. AGREEMENT TO PARTICIPATE AND LIABILITY WAIVER – I understand waterskiing activities involve risk and possible injury, even paralysis or death. I understand that it is my responsibility as parent/guardian not to let my child participate if he/she has any physical, emotional, or other problems that might compromise safe involvement. I understand that injuries can and do occur and that health insurance is a requirement along with USA Water-ski Insurance.

I, the undersigned, for myself, my heirs, personal representatives and assigns, hereby release and forever discharge the Beaverland Must-skis Water-ski Show Team (officers, directors, agents, servants and all persons volunteering their services for said team’s activities and ski practices)of and from any and all rights, claims, demands and actions whatsoever which I may have for any and all loss, damages or injury sustained by me or my equipment during any such team activities including any water-ski practices, performances and competitions.

PARTICIPANT _____ DATE _____

PARENT/GUARDIAN _____ DATE _____
(If under 18)

SKIING MEMBER WORK CREDITS

All skiers are responsible to work at least 20 hours or pay an additional fee of \$100.00 (\$5.00/hour).

____ I/we will pay \$100.00 in lieu of working 20 hours of work credits (per skiing member).

____ I/we will work at least 20 work credit hours (per skiing member).

PARTICIPANT _____ DATE _____

PARENT/GUARDIAN _____ DATE _____
(If under 18)