



2011-2012

Individual Leader Registration Form

County (check one) Bayfield Ashland

Additional donation \$ _____ are tax-deductible and support youth Nordic ski programs.

Skiing interest (check all that apply) Recreational Racing Classic Skating Both

Contact Information

Last Name _____ First Name _____ M.I. _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Primary Cell _____

Email Address _____ I'd prefer electronic communication Yes No

(Most CANSKI communication takes place via email.)

Other Information

Birthday ____/____/____ Gender Male Female

Residence: Farm Rural non-farm or town less than 10,000

Ethnicity (check all that apply) Hispanic or Latino White Black or African American American Indian or Alaskan Native

Asian Native Hawaiian or Other Pacific Islander More than one race Other

T-shirt size (adult sizes) XS S M L XL XXL

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Yes No I want the University to keep my name and contact information private when creating a public record or list.

Yes No I require an accommodation for a disability to participate in this program.

Signatures and Emergency Contact Information

Member signature _____ Date _____

Emergency phone numbers: _____

Family Physician _____ Phone _____ Clinic _____

(over)