

# MANSFIELD ATHLETICS Snowboarding



## 2010/2011 Information Form

**Coaching Session(s)**      **Date of Session(s):** \_\_\_\_\_

- 9:00 AM – 11:30 AM ( Session #1 )       12:30 PM – 3:00 PM ( Session #2 )
- \$200.00** per session ( single athlete private session )  
 **\$100.00** per session, per athlete ( group of 2 athletes )  
 **\$65.00** per session, per athlete ( group of 3 or 4 athletes )  
 **\$40.00** per session, per athlete ( group of 5 athletes )

**Cash or Check ONLY**  
**Checks payable to: Mansfield Athletics**

**Consultation**      **Date of Session:** \_\_\_\_\_

- \$35.00** Professional Tuning Clinic ( **\$20.00** per athlete for groups of 2 or more )  
 **\$65.00** Strength Training Program  
 **\$250.00** On-Site Competition Coaching

Athlete's Name: \_\_\_\_\_

Sex:  Male  Female      Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**ALL correspondence from Green Mountain Athletics will be sent to this email address. Please double check for accuracy!**

Phone Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone #: \_\_\_\_\_

Primary Medical Coverage Company: \_\_\_\_\_

Medical Insurance Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

**OFFICE USE ONLY**

**LIABILITY WAIVER & RELEASE FORM MUST BE SIGNED AND ACCOMPANY THIS FORM  
PLEASE PRINT CLEARLY**