

For Office Use Only
___ Program Application
___ Mbsef/Mt. Bachelor Release
___ Date Entered

MT. BACHELOR SPORTS EDUCATION FOUNDATION



2011-2012 CROSS COUNTRY MASTERS PROGRAM ENROLLMENT

Participant Name _____

E-Mail _____ Cell Phone # _____
(Email Addresses For Newsletters, Updates and Training Changes)

Mailing Address _____ City _____ State _____ Zip Code _____

Enroll by checking the appropriate program. Include Liability Release if not on file:

<p>NORDIC MASTERS</p> <p>SESSION I SKATE <input type="checkbox"/> \$150</p> <p>10:00am Tuesday</p> <p>6 Weeks Jan 10,17,24,31, Feb 7,14</p> <p>Coach Eric Martin</p> <p>SESSION II SKATE <input type="checkbox"/> \$150</p> <p>10:00am Thursday</p> <p>6 Weeks Feb 16,23, Mar 1,8,15,22</p> <p>Coach Eric Martin</p>	<p>NORDIC MASTERS</p> <p>SESSION I CLASSIC <input type="checkbox"/> \$150</p> <p>10:00am Wednesday</p> <p>6 Weeks Jan 11,18,25, Feb 1,8,15</p> <p>Coach Tim Gibbons</p> <p>SESSION II CLASSIC <input type="checkbox"/> \$150</p> <p>10:00am Wednesday</p> <p>6 Weeks Feb 15,22,29, Mar 7,14,21</p> <p>Coach Tim Gibbons</p>	<p>Nordic Masters 7:00am Early Morning Workouts</p> <p>1 day/wk <input type="checkbox"/> \$ 50</p> <p>2 day/wk <input type="checkbox"/> \$100</p> <p>Tuesdays and Thursdays starting January 10 through March 15. Early Morning Work Outs at MBSEF's training gym facility is the perfect complement to Nordic Skiing. Early morning ski specific strength and fitness sessions for citizen racers, masters, and fitness skiers. Participants will do an hour of strength and fitness work to develop the core, shoulder, arm, and leg strength needed to improve their skiing. Each session will be in the MBSEF Gym above the MBSEF office in town just off Century Drive. These are sessions run by MBSEF coaches and are not recommended for people needing medical supervision or who are just starting out on a fitness program.</p>
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Payment: Cash Check Visa Mastercard

Amount Paid \$ _____ Check/Ref # _____ Balance Due _____

Date Paid _____ Name on Card _____

Credit Card # _____

Expiration Date _____ 3 Digit Security Code _____

Office Use Only: Acct. Initials _____ Date Posted _____