

Sean Cassily, Head Coach 779.3729

Sanjay Poovadan, Chair 779.1021

Tim Gaffney, Vice Chair 377.5968



**Taos Sports Associates**

P.O.Box 3011

Taos, NM 87571

taosskiteam.com

email sean@taosskiteam.com

MASTERS REGISTRATION FORM 09-10

ATHLETE NAME: \_\_\_\_\_

USSA#: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

NUMBER OF YEARS RACING: \_\_\_\_\_

NUMBER OF YEARS ON THE SKI TEAM: \_\_\_\_

Place an asterisk next to your preferred source for communication of general ski team information.

We request that you complete and submit the **registration form, fee calculation sheet, medical release, and liability form** to the address below as soon as possible so that we can include your information in the 2009-2010 TSA ALPINE MANUAL. Pay by October 12 to receive a 5% discount. A multiple member family discount of 10% can be applied starting with the lowest training fees. For example, a USSA level JI will pay the stated amount and a Masters racer from the same family may take the 10% discount. Attached is a form for calculating your fees.

Sincerely,

TSA Board of Directors.

Sean Cassily, Head Coach 779.3729  
Sanjay Poovadan, Chair 779.1021  
Tim Gaffney, Vice Chair 377.5968



## Taos Sports Associates

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### MASTERS PROGRAM FEES 2009-2010

Athlete Name:

FULL-TIME \$800  
PUNCH CARD (10 DAY) \$400

Program Fee  
Additional Family Member discount of  
10% off the lesser of the program fees  
Subtotal  
If prior to Oct 12 deduct 5%  
TSA Membership Fee

1st\$ \_\_\_\_\_ 2<sup>nd</sup>\$ \_\_\_\_\_

-\$ \_\_\_\_\_

=\$ \_\_\_\_\_

-\$ \_\_\_\_\_

+\$50.00

TOTAL

=\$ \_\_\_\_\_

Please mail these forms, and full payment (payable to Taos Sports Associates) to the address below.

Thank you,  
TSA Board of Directors

**2009-2010 Taos Sports Associates Medical Release**

Athlete's Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Athlete's Social Security #: \_\_\_\_\_

Athlete's Address: \_\_\_\_\_

Athlete's Telephone: \_\_\_\_\_

In case of emergency please notify:

Name: \_\_\_\_\_

1<sup>st</sup> Phone: \_\_\_\_\_

2<sup>nd</sup> Phone: \_\_\_\_\_

**Insurance Coverage**

Company: \_\_\_\_\_ Member #: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Medical History**

Allergies

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Medications

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Medical Information

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Athlete Medical Release** Athlete hereby authorizes Taos Sports Associates and/or their named coaches, to secure any hospital, medical, dental or surgical care, treatment and/or procedures for the above named athlete. Athlete also consents that in the event of injury to the athlete, coaches can sign for competitor to receive care, treatment and/or procedures, under the instructions and directions of the licensed physicians on call at the emergency room of the nearest hospital or emergency facility. Athlete knowingly and voluntarily consents in advance to such care, treatment and or procedures to encourage the physicians and coaches to exercise their best judgment as to the requirements of such care, treatment and/or procedures. Athlete specifically indemnifies and holds harmless Taos Sports Associates and its coaches from any and all costs arising out of such care, treatment and/or procedure.

Athlete Signature & Date \_\_\_\_\_

**2009-2010 Taos Sports Associates Liability Agreement**

**COMPLETE RELEASE OF LIABILITY AND INDEMNITY AGREEMENT**

The undersigned, being at least 18 years of age, hereby represents that he or she is the athlete or the parent/guardian of \_\_\_\_\_ (hereinafter referred to as "child(ren)", and in exchange for Taos Sports Associates (TSA) making ski racing, training and related activities available and Taos Ski Valley, Inc. (TSV) making its ski area available to me and my child(ren), hereby contracts and agrees as follows:

I understand and **EXPRESSLY AGREE** to the fact that skiing in its various forms is an inherently hazardous sport that has many dangers and risks. I realize that injuries are a common and ordinary occurrence of this sport. I acknowledge that **SKI RACING AND TRAINING** and related activities are **ESPECIALLY HAZARDOUS** activities and **GREATLY INCREASE THE RISKS** of skiing and that I have made a voluntary choice to participate in those activities myself or to allow my child(ren) to do so despite the risks they present. **I**

**EXPRESSLY AGREE** that I freely accept and voluntarily assume **ALL RISKS OF PERSONAL INJURY OR DEATH** or property damage for myself and my child(ren). I hereby promise not to sue and **FULLY RELEASE** TSV, TSA and its agents employees, coaches, directors, officers and volunteers **FROM ANY AND ALL LIABILITY** for personal injury, death or property damage which results **IN ANY WAY** from my or my child(ren)'s participation in this sport, including any caused by **NEGLIGENCE**, conditions on or about the premises and facilities or the operations of its ski area including, but not limited to, grooming, snow making, ski lift operations while loading or unloading, gate setting, course setting, training, coaching, other skiers or any other activities related to ski racing and **ACCEPT MYSELF THE FULL RESPONSIBILITY FOR ANY AND ALL** such damages or injury of any kind which may result to **ME OR MY CHILD(REN)**.

In addition, the athlete or parent/guardian signing below represents to TSV and TSA that they have the authority to enter into this agreement on behalf of the athlete and said **CHILD(REN)** and on behalf of any other parents or guardian of said **CHILD(REN)** and **AGREES TO DEFEND AND COMPLETELY INDEMNIFY** and hold harmless TSV and TSA from any and all claims arising from the athletes or child(ren)'s participation in ski racing and/or training and this agreement is entered into on behalf of the athlete or said **CHILD(REN)** or any other parent/guardian thereof, even after the **ATHLETE/CHILD(REN)** has attained majority or from third parties injured by the **CHILD(REN)**, and hold TSV and TSA its representatives, agents, affiliates, officers, directors, servants, and employees harmless from any such claim, legal action, harm, injury, damages, or loss of persons and/or property.

**I CONTRACTUALLY AGREE** that any and all disputes between myself and TSV arising from my or my child(ren)'s use of its ski area for ski racing and training, including any claims for personal injury and/or death, will be **GOVERNED BY THE LAWS OF THE STATE OF NEW MEXICO** and the **EXCLUSIVE JURISDICTION** thereof will be in the state of federal courts of the **STATE OF NEW MEXICO**.

I have carefully read the foregoing **COMPLETE RELEASE OF LIABILITY** and **INDEMNITY AGREEMENT** and understand its contents, including the jurisdictional agreement. **I ACKNOWLEDGE** and understand this is a **COMPLETE RELEASE AND INDEMNITY AGREEMENT**, that it includes any and all claims by my children(ren) or by me or anyone on my child(ren)'s behalf for any reason, **INCLUDING NEGLIGENCE**, and that I am contractually agreeing to these terms **FREELY, FULLY AND WITHOUT RESERVATION** in exchange for the right for me or my child(ren) to participate in ski racing and/or training at this ski area

**I AM AWARE THAT THIS CONTRACT IS LEGALLY BINDING AND THAT I AM RELEASING LEGAL RIGHTS BY SIGNING IT.**

Athlete \_\_\_\_\_ Date \_\_\_\_\_

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

Telephone Number with Area Code \_\_\_\_\_