### Race Program Fee Structure 2022

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2022 Program Fee: \$330

\$330 Program Fee INCLUDES: Coach Program for 9 weeks (9:30-12:00, Saturday, January 8, 2022 thru Saturday, March 5, 2022) AND Race Entrance Fee for ALL Challenge Race Series Races. Program Fee does not include lift pass.

10% Discount if you register and pay early.

10% Discount for each Additional Child (maximum combined discounts for early pay and additional child can be no greater than 30%):

Pay By	First Child	Second Child	Third Child
Saturday, January 8, 2022	\$330	\$300	\$270
November 30, 2021	\$300	\$270	\$240

## TITUS MOUNTAIN RACE COACHING PROGRAM 2022

#### PHILOSOPHY

Titus Mountain Racer Coaching Program is a season-long program (9 training sessions) for participants age 6-18 that is designed to promote and support the development of fundamental alpine skiing skills. The training program is based upon the USSA Alpine Training System and Skills Quest program. The program goal is to create good skiers through racing. Emphasis is placed on having fun and socializing with friends while developing new skills and nurturing a lifelong enthusiasm for the sport.

#### **PREREQUISITES**

- Pre-registration is mandatory. Registration for 2022 will be open through 1/8/22.
- Participants must, at a minimum, be able to load & unload from a chairlift unassisted; and safely navigate down Intermediate ("blue square") terrain.

# 2022 CALENDAR

- Program commences 1/8/22 & runs every Saturday morning through 3/5/22 (9 weeks).
- Each day's session begins @ 9:30am sharp and will conclude with the participants of the program being released at 12pm to parents/guardians to compete in the CHALLENGE Race.

#### COST

2022 Program Fee is \$330.00; Program Fee does include Challenge Race Series; Program Fee does not include lift tickets. See Race Program Fee Structure above for applicable early pay and additional child discounts.

# **Race Coaching Program Registration & Release Form**

Name:		Date of Birth:	
Age:	Male or Female:	<u></u>	
Address:			
Phone #:		E-mail (for weekly info):	
Emergency	y Contact Name & Phone#:		
		LEASE FOR MINORS PARTICIPATING IN RACE COACHING PR	
agents, volureferred. I affiliates, of responsible Center, LLC knowledge & It is further the above n	r guardian(s), do hereby for	as my/our permission to participate in the Titus Mountain , myself, my heirs, executor nter, LLC and its owners, representatives, affiliates, officers, resuccessors and assigns, from any & all claims, demands, actions and Ski Racing and that Titus Mountain Family Ski Center, nts, lessors, agents, volunteers and employees, and their subderstand that this program is being provided through the coordinates and that the information above is accurate. I do h. In case of illness or accident, permission is granted for emember of the coordinates of	rs & administrators, remise, release & managers, directors, servants, lessors, ons or causes of action on account of LLC and its owners, representatives, accessors and assigns, are in no way operation of Titus Mountain Family Skip hereby certify that to the best of my ergency treatment to be administered. By advise that a present advise that a present access. I hereby advise that a present access the service of the service access to the
	(Please	e list medical conditions. If none, write the word "NONE".)	
Signatur	re(s) of Parent(s)/Guardian(s)		Date
Printed N	Name(s) of Parent(s)/Guardian(	(s)	
	., .,	• /	
ADDITION	IAL CHILD ADDENDUM TO TIT	US MOUNTAIN RACE COACHING PROGRAM REGISTRA	ATION & RELEASE FORM
(CF:14 #2)	Name	Date of Pittle	
		Date of Birth:	
Age:	Male or Female:		
Address:			
Phone #:		E-mail (for weekly info):	
Emergency	y Contact Name & Phone#:		
		LEASE FOR MINORS PARTICIPATING IN RACE COACHING PR	
forever disci agents, volu referred. I affiliates, of responsible Center, LLC knowledge & It is further the above n	r guardian(s), do hereby for	as my/our permission to participate in the Titus Mountain , myself, my heirs, executor nter, LLC and its owners, representatives, affiliates, officers, resuccessors and assigns, from any & all claims, demands, actions and Ski Racing and that Titus Mountain Family Ski Center, nts, lessors, agents, volunteers and employees, and their sufferstand that this program is being provided through the coopponsibility, and that the information above is accurate. I do h. In case of illness or accident, permission is granted for emerical measure full responsibility for any such action, including pagies, reactions or unusual physical condition which should be responsible to the such action of the such a	rs & administrators, remise, release & managers, directors, servants, lessors, ons or causes of action on account of LLC and its owners, representatives, accessors and assigns, are in no way operation of Titus Mountain Family Skip hereby certify that to the best of my ergency treatment to be administered. By advise that a present advise that a present access. I hereby advise that a present access the service of the service access to the
	(Please	e list medical conditions. If none, write the word "NONE".)	
Signature(	s) of Parent(s)/Guardian(s)		Date
	<del></del>		
Printed Na	me(s) of Parent(s)/Guardian(s)		

(Child #3) Name:	Date of Birth:	
Age: Male or Female:	_	
Address:		
Phone #:	E-mail (for weekly info):	
Emergency Contact Name & Phone#: _		
PERMISSION/I	RELEASE FOR MINORS PARTICIPATING IN RACE COACHING PROGRAM	
forever discharge Titus Mountain Family Ski agents, volunteers and employees, and thei referred. I realize that there is a risk in Sk affiliates, officers, managers, directors, ser responsible for any accident that occurs. I Center, LLC. I certify that the minor is my knowledge & belief; said minor is in good he It is further understood that the undersigne	, myself, my heirs, executors & admin Center, LLC and its owners, representatives, affiliates, officers, managers, ir successors and assigns, from any & all claims, demands, actions or causiing and Ski Racing and that Titus Mountain Family Ski Center, LLC and it vants, lessors, agents, volunteers and employees, and their successors a understand that this program is being provided through the cooperation of responsibility, and that the information above is accurate. I do hereby ce alth. In case of illness or accident, permission is granted for emergency tred will assume full responsibility for any such action, including payment of clergies, reactions or unusual physical condition which should be made knowledges.	directors, servants, lessors ses of action on account of ts owners, representatives and assigns, are in no wa f Titus Mountain Family Skortify that to the best of meatment to be administered costs. I hereby advise that
(Ple	ase list medical conditions. If none, write the word "NONE".)	
Signature(s) of Parent(s)/Guardian(s)	)	Date
Printed Name(s) of Parent(s)/Guardia	an(s)	

Please make checks payable to & mail to:

Titus Mountain Family Ski Center, LLC 215 Johnson Road Malone, NY 12953 For more information, please contact:

Franz Fredericks, Director – Coaching & Staff Phone #: (518) 651-4505 E-Mail: franzfredericks@yahoo.com

