

YOUR TURN SKI EVENTS WITH LISA DENSMORE BALLARD

SKIER REGISTRATION FORM

All information will be held in strictest confidence.

EVENT LOCATION: _____ DATE: _____

Name: _____

Mailing Address: _____

City/State/Postal Code: _____

Telephone: _____ Email: _____

Years Skiing: _____ Age: _____

Circle one

Have you participated in one of Lisa's ski clinics? YES NO

If so, where: _____ what year(s)? _____

The following information will be used to place you with a group of skiers who have similar interests and abilities.

Skiing Pace: (Check one)

- _____ 1. I'm very cautious all the time and ski at a slower pace than most other skiers.
_____ 2. I ski at a moderate pace, unless the conditions, visibility or terrain is challenging.
_____ 3. I ski at the same as the average skier on the slopes.
_____ 4. I love to ski fast! I often pass other skiers on the slopes.

Skiing Ability: (Check one)

- _____ 1. Intermediate: I ski on easy to moderate groomed slopes. I use a wide parallel stance. Sometimes I have to use a wedge or step to enter a turn. I have no idea what to do with my ski poles.
_____ 2. Strong Intermediate: I ski mainly on the groomed slopes. My skis are parallel, except when I get nervous or the snow conditions are difficult. My pole plant needs some help. I want to improve my confidence while exploring new terrain.
_____ 3. Advanced: My skis are always parallel. I can ski expert terrain, although I am not always smooth and graceful on the steeper trails, especially in difficult snow conditions or if I encounter deep powder, ice, or bumps. I can make short turns down the fall-line or big turns across the hill at will. I can easily control my speed.
_____ 4. Expert: I am a confident skier. I make strong, parallel turns anywhere on the mountain, regardless of snow conditions and the terrain. I want to fine-tune my skills.

Special Interests

Please check all that apply:

_____ Racing _____ Moguls _____ Powder _____ Other: _____

Is there another person(s) with whom you would like to ski? _____

Do you have a health condition(s) that inhibits your skiing ability? _____