

Buffalo Ski Center

Council Racing and Rising Stars Racing 2019-2020

Council Racing (8-18 years old); **Cost: \$500 before 11/1/19 (\$600 after 11/1/19)**

80 hours practice and 48 hours coaching at competitive races; helmet required (FIS approved for U16+); Includes Fall Dry Land Training and Christmas Camp at BSC.

Our Council Race team is a member of the Niagara Frontier Ski Council and USSA Eastern Region and is staffed with USSA certified coaches. The Council Racing Program is a fun and challenging way for kids to develop/strengthen the fundamental techniques of alpine racing (all with a focus on safety). Council racing is organized around age brackets (age as of Dec. 31), and competitions take place (on weekends) at various Western and Central New York resorts. All events are US Ski and Snowboard Association (USSA) and New York State Ski and Snowboard Racing Association (NYSSRA) sanctioned. Racers ages 15 and older can compete at any USSA-sanctioned event, building points to gain spots on development teams – including the US Ski Team! Prior racing experience is not required. Council members are also required to join NYSSRA and USSA (usually by Oct. 15th)-both are required to participate in any Council Race.

Training Wednesday, 6 pm - 8 pm, Thursday 6 pm – 8pm and Saturday 9 am-2:30 pm

Questions Contact Brad Rauch at 716-572-2088 or office@buffaloskiclub.com

Rising Stars (8-18 years old) **Cost: \$450 before 11/1/19 (\$550 after 11/1/19)**

This program is designed for experienced skiers who wish to explore to the fundamentals of alpine racing. Skiers will follow the same training schedule as the Council Race Team (with *some* adjustments on weekends when many coaches may be traveling). Rising Star members will have the opportunity to participate in BSC fun Club races but will not race in the NFSC or USSA sanctions races and they will not need to travel. This program is limited to 20 participants and participants may not exceed two years as a Rising Star.

Training Wednesday, 6 pm-8 pm Thursday 6pm – 8pm and Saturday 9 am-2:30 pm

Participant Name: _____ DOB: Month ___ Day ___ Year ___ Male/Female - Council/Stars

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Participant Name: _____ DOB: Month ___ Day ___ Year ___ Male/Female - Council/Stars

Participant Name: _____ DOB: Month ___ Day ___ Year ___ Male/Female - Council/Stars

Parent/Guardian Name: _____ Cell Phone: _____

(Cell numbers are helpful to locate parents if a problem arises during lesson time)

Confirmation email: _____

Payment must be received with registration to reserve lesson day and time.

Amount due: _____ Name on card: _____ Date _____

Credit card number: _____ Sec Code _____ Exp date: _____

Billing address: _____

Signed: _____ Date: _____

Remit to: Buffalo Ski Club, PO Box 608, Orchard Park, NY 14127

FREESTYLE, RACE AND EXTREME TEAMS

**BUFFALO SKI CLUB PERMISSION TO PARTICIPATE IN TRAINING AND COMPETITIONS AND
ACKNOWLEDGEMENT AND ASSUMPTION OF RISK**

**READ CAREFULLY THIS ACKNOWLEDGEMENT AND ASSUMPTION OF RISK AFFECTS YOUR
AND YOUR CHILD’S LEGAL RIGHTS**

1. Parental Consent

I have enrolled myself/my child in Buffalo Ski Club’s Freestyle, Race or Extreme Team for the 2018/2019 season.

2. Assumption of Risk.

I understand that this includes, but is not limited to, training, races, boarder cross events, rail jams, jumping, and events on ski slopes and trails and in terrain parks, quarter pipes and half-pipes. I acknowledge that this type of skiing/snowboarding is dangerous. I understand that the competitions include risks of injury from, but not limited to, falls, terrain park elements, jumps, slide rails and other man made features, changing weather conditions, bare spots, variations in snow, ice, other ground cover, surface and subsurface conditions, and terrain, bumps, moguls, rocks, debris, equipment and machinery on slopes, collisions with other skiers and snowboarders and natural and manmade objects, and skier/snowboarder error. I/my child will visually inspect the terrain and features before participating in each competition. Fencing, equipment covers, padding, signs, rope lines, and other marking devices may be in place in the terrain in which the competition takes place. These markers will not prevent injury. I understand that it is my/my child’s responsibility to stay away from marked areas. I also understand that there may be natural and manmade hazards which may not be marked. I acknowledge that I/my child have sufficient skills to participate in each competition safely, and that I/my child will use equipment that is suitable for participating in each competition safely. I am aware that participation in each competition may result in serious injury, property damage, or death from these risks, and I voluntarily accept such risks on behalf of myself and my child. I have explained the risks inherent in each competition to my child in an age appropriate manner and he/she has acknowledged that he/she understands and accepts those risks.

3. Effect on Legal Rights.

I have read this agreement carefully and understand its contents. I have read this agreement to my child and he/she has acknowledged that he/she understands its contents. I am aware that the agreement includes an express assumption of risk. I understand that this agreement may affect legal claims for damages in the event of death or any injury to me/my child. I acknowledge that any questions I/my child have about this agreement or the risks inherent in participating in the competitions have been answered to my/my child’s satisfaction. I signed this document of my own free will.

4. Controlling Law. I agree that the terms of this agreement are binding on me/my child, and shall be governed by the Laws of the State of New York.

5. Model Release: I hereby consent to the use of my name and picture by Buffalo Ski Club, their agents or assigns, for any and all purposes including without limitation television, theater, publication, and any other trade or advertising purposes.

Inverts/Somersaults are Not Permitted.

An invert in practice or during competition will result in a disqualification.

Initials

Date: _____

Registrant(s): _____

Parent/Guardian: _____