



FORM 3: Alpine Skiing Registration Form

Local Program: _____
 Local Program Coordinator: _____
 Competition: _____

Head Coach:

Last Name	First Name	Type	Cell Phone	Email Address
		Head Coach		
		Assistant Coach		
		Assistant Coach		

(Required)

(Optional)

(Optional)

Times must be recorded as 00:00.00 (mm:ss.00). Registrations with missing information will not be accepted.

List of Athletes:

	Last Name	First Name	DOB	M/F	Sit Skier?	Level	Event Code	Time	Event Code	Time	Event Code	Time
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												

NOTES:

Event Codes:

Official Events

- ALGSLA - Alpine Giant Slalom
- ALSPRG - Alpine Super G Slalom
- ALSLAL - Alpine Slalom

Beginner Events

- AL10R - Alpine 10 Meter Walk
- ALGLID - Alpine Glide Event
- ALSGID - Alpine Super Glide

Levels:

(for official events only)

- I
- IA
- II
- III