



OFFICE USE ONLY

2009/2010 Training Director Application

TRAINING DIRECTOR INFORMATION returning TDs - check box if any contact information is different than last season

Training Director Name		Email Address	
Mailing Address	City	State	Zip
Primary Contact Tel #	Secondary Contact Tel #	Member #	Discipline & Cert Level

SNOWSPORTS SCHOOL INFORMATION

Snowsports School Name		Operation Area (i.e. Ski Resort)	
School Director's or Manager's Name	Phone	Email	

CREDIT CARD ON-FILE

CREDIT CARD NUMBER (PLEASE PRINT CLEARLY)	EXP. DATE	<u>X</u> YOUR SIGNATURE
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There is a \$25 cancellation and late fee for all TD events. If you sign up for an event and do not show up or do not notify the office within 48 hours of **the start of the event**, the credit card on file will be charged \$25 (e.g. Winter Training at Stevens Pass - must notify office 48 hours before the first day of this 3-day event). If you sign up for any TD training event less than seven (7) days before the event, your request to attend will be granted on a space-available basis and your credit card will be billed \$25.

TRAINING DIRECTOR SEASON FEE

BILL MY CREDIT CARD \$ _____ (amount)

BILL MY SCHOOL \$ _____ (amount)

"Bill my School" option requires prior approval between your school and the office. Check with your director & PSIA-NW office before choosing this option.

SEASON FEE TOTAL \$175

PSIA Member Schools whose sole training director is a PSIA-NW DCL are required to pay the TD fee. Schools may have more than one TD. \$175 season fee applies per TD.

SNOWSPORTS SCHOOL APPROVAL METHOD

PHONE FAX EMAIL SIGNATURE (BELOW)

X

MAIL WITH CHECK OR CREDIT CARD INFO TO:
PSIA-NW, 11206 Des Moines Memorial Dr., #106
Seattle, WA 98168
FAX WITH CREDIT CARD INFO TO: 206.241.2885

LIABILITY RELEASE FORM (you must sign this release before attending any PSIA-NW event):

Recognizing that skiing/boardng can be a hazardous sport, I hereby RELEASE AND FOREVER DISCHARGE PSIA-NW, PNSIA-EF, the host area and agents and employees of each from liability for any and all injuries of whatever nature arising during or in connection with the conduction of the event for which this application is made. Applicant hereby relinquishes and assigns to PSIA-NW and PNSIA-EF all rights to the use of Applicant's name and likeness or pictorial representation in photographs, motion pictures or other representations concerning Applicant's participation in said Event.

Training Director Signature _____ Date _____