



Cross Country Canada – Club Registration Form

Ski Season / Insurance Year: **2011/2012**

Club Name: _____
(Please Print)

Club Mailing Address: _____
City/Town: _____ Province/Territories: _____ Postal Code: _____
Contact Name: _____
Phone Number: _____
Fax Number: _____
Email Address: _____
Website Address: _____
Number of members (previous season): _____

Does your Club offer Para-Nordic programs? Y / N
Please check all that apply: Recreational ___ Competitive ___ Integrated ___
Would your Club like to offer Para-Nordic programs? Y / N
Does your Club have sit-skis available for a Para-Nordic program? Y / N
Who is the contact person for your Para-Nordic program?
Name: _____ Phone number: _____
Email: _____

The above information will be made public on the Cross Country Canada website in the Club Database.

On behalf of the _____ Ski Club, I have read the CCC Insurance Manual and agree to the recommendations outlined, including the safety features and the requirement to have all club members and guests sign the appropriate Club Waiver and Acknowledgements Form or Participant Form upon application to the Club or Club activity.

Name of Club President / Chairperson: _____
Phone Number: _____
Email: _____

Signature: _____ Date: _____
(Club President/Chairperson)

Note: Please note that no modifications can be made to the CCC section above. The layout and content was specified by our legal advisor in order to meet our insurance underwriter obligations. Divisions may add (leaving the CCC section above intact) additional registration information requirements to this form in order to produce a single form that meets both CCC and Division needs.