

# Olympic Ski School 2018 Season Enrollment Application

Olympic Ski School  
18908 Hwy 99  
Suite E  
Lynnwood, WA 98036

## Application Information

Name \_\_\_\_\_

Address		City	State	Zip
Home Phone	Cell/Work Phone	Email Address	Age	
Emergency Contact	Emergency Phone	Lesson Type Ski <input type="checkbox"/> Snowboard <input type="checkbox"/>		

## Lessons Selection

Ability Level \_\_\_\_\_

Choose a Lesson Day

Wednesday  Thursday  Saturday  Sunday

I would like to ski or board with my friend of the same ability.

### Junior Series

	Lesson Choices
Age 4	<input type="checkbox"/> 6 half day (2 hrs) \$275
Age 5 - 6	<input type="checkbox"/> 6 half day (2 hrs) \$205 <input type="checkbox"/> 6 all day (3.75 hrs) \$350
Age 7 - 12	<input type="checkbox"/> 6 half day (2 hrs) \$195 <input type="checkbox"/> 6 all day (3.75 hrs) \$315

### Free Ski Program

	Lesson Choices
Freeride Team	<input type="checkbox"/> (Sat) 6 wk /5 hrs \$550
Freeride Team	<input type="checkbox"/> (Sun) 6 wks/5 hrs \$550

### Midweek "Fun Bust"

<input type="checkbox"/> 6 half day (1.5 hrs) \$185
<input type="checkbox"/> 7 round trips transportation \$325
<input type="checkbox"/> 7 discount transportation \$310 (available only with 7 mid-week lesson purchase)
Desired pickup point: _____

### Olympic Teen and Adult

	Lesson Choice
Age 13 & Over	<input type="checkbox"/> 6 half day (2 hrs) \$195

## Payment Information

I have read and agree to all the terms and conditions stated in the RELEASE OF LIABILITY document.

Please print and sign and mail with payment to:

Olympic Ski School 18908 Hwy 99  
Suite E  
Lynnwood, WA 98036

Check Enclosed       Visa       MasterCard      Card Number: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Exp Date: \_\_\_\_\_ Total Due: \_\_\_\_\_

Name (Please Print)	Signature
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