



USSA Central Division
J4/J5/J6 Finale
Ski Brule, MI
March 7-8, 2009

The following information must be complete.

- 1. Medical / Accident Insurance information including the name of your carrier and a Group or policy #. If you do not hold primary insurance, a Medical Exception Agreement must be completed.
2. The Waiver and Release of Liability, on the back of this form, must be signed.

Please print clearly:

Cost - \$25 per person

Name, Home Phone, Address, Work Phone, City, State, Zip, Fax Number, Sex, Date of Birth, E-mail, Are you a U.S. citizen?, Which country?, Have you had a USSA Membership in the Past?

Medical/Accident Insurance Information

Valid primary medical/accident insurance coverage must be maintained at all times for Member. Failure to provide accurate information demonstrating the existence of such insurance coverage for Member will prevent processing of this application and cause termination of membership and suspension of all rights to participate in U.S. Ski & Snowboard Association activities...

Primary Medical Insurance Company Name:
Policy #, Group #, Phone #

Please note that a USSA Temporary Registration is not upgradeable or refundable. Athletes who compete under a USSA Temporary Registration will not be scored on the USSA Alpine Ranking List. This registration is only valid for the site and events listed above.

Method of payment: Cash, Check #, Amount \$, Visa/Mastercard #, Exp. date, Signature

Please do not forget to sign the Waiver on the back of this form.