

**Ivenski Nordic Summer Training  
June 14 -July 28, 2022  
REGISTRATION**

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Medical conditions we should know about \_\_\_\_\_

Experience Skiing: Years Classic \_\_\_\_\_ Years Skate \_\_\_\_\_

**Cost: \$200.00 No Refunds Registration Due: June 9, 2022**

\_\_\_\_\_ Need Poles to use include skiers height \_\_\_\_\_

\_\_\_\_\_ Need Rollerskis to use

Make checks payable to:

Kevin Ivens

10905 Edgewood Avenue North

Champlin, MN 55316

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**WAIVER AND RELEASE OF LIABILITY**

Identification of Risk: I \_\_\_\_\_, Know that cross country ski training and rollerskiing involves risks of serious injury, including permanent disability and death. I understand that these injuries might result not only from my actions, but the actions, inactions, or negligence of others.

Assumption of Risk: I agree that I am Responsible for my safety while participation in training. I assume all risks, both known and unknown, connected with my participation.

Waiver: Being aware of the risks and willing to assume them, I waive, release and hold harmless Kevin Ivens, Ian Ivens, Ivenski Nordic Summer Training program, Champlin Park High School Nordic Booster Club other sponsors, and owners of property and trails used by me from all claims for liability, injury, loss, or damage connected with my participation in cross country ski training. I intend for this waiver and release to also apply to my relatives, personal representatives, heirs, beneficiaries, next of kin and assigns.

Insurance: I currently have, and agree to maintain throughout the time I participate, sufficient medical and accident insurance. I understand that this is my responsibility and release any one else from providing it for me. I further grant permission to Ivenski to use any photographs, videotapes, motion pictures, recordings, or any other record of this program for any purpose without limitation or compensation.

I have read this agreement carefully, understand that I give up substantial rights by signing it, and sign voluntarily.

\_\_\_\_\_  
Participant's signature

\_\_\_\_\_  
Date

For Participants under age 18:

I consent to the above person's participation in cross country ski training. I acknowledge that I assume all risks, known and unknown, and waive all claims in advance.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date