

Riding Clinic Registration

Name: _____

Address: _____

City/State/Zip _____

Telephone: _____ E-Mail: _____

What level rider do you consider yourself: ___ beginner ___ intermediate ___ experienced

I ___ will ___ will not have my own sled for the training course

I would like to improve the following skills: (check all that apply)

- ___ Basic snowmobile controls & operation
- ___ Cornering
- ___ Crossing snowbanks
- ___ Crossing running water hazards
- ___ Riding across lakes
- ___ Map reading/signage
- ___ Trail etiquette/rules of riding
- ___ Survival skills and gear
- ___ First aid
- ___ Proper attire for different riding conditions
- ___ Sled maintenance and troubleshooting

\$50.00 fee Paid by: cash ___ check ___ Paypal ___

___ Please check here if you will be riding in the Trail Ride on Sunday

Please mail this form and the participation waiver back or e-mail to pj@ncsc-up.com

North Country Snowmobile Club, PO Box 91, Ontonagon MI 49971

After receipt of your registration, we will reach out to you with a welcome letter and more detailed information on lodging, sled rental, clothing needed, etc.

****We will only be accepting the first 20 paid registrations, all others will be put on the wait list****