

Race Team Member Application 2018-2019 Season Palmetto Ski & Outing Club

Name: _____ Date of Birth: _____
 Address: _____ Gender: F M
 City-ST-Zip: _____ T-shirt: XS S M L XL XXL
 Contact Info: Phone#1: _____ Phone#2: _____
 E-mail: _____

You must already be a member of PSOC to participate.
 2018 -2019 race fee is \$10.00. New racers pay only after establishing a qualifying handicap.
 Make check payable to "Palmetto Ski & Outing Club".

Please indicate the races you plan to attend. Notify me *immediately* if your plans change.

Event	Dates	Location	Sat	Sun
Race Weekend #1:	Dec 15 & 16	Appalachian, NC	___	___
Race Weekend #2:	Jan 5 & 6	Sugar Mtn., NC	___	___
Race Weekend #3:	Jan 26 & 27	Appalachian, NC	___	___
Race Weekend #4:	Feb 9 & 10	Beech Mtn., NC	___	___
Race Weekend #5:	Feb 23 & 24	Sugar Mtn., NC	___	___
Race Weekend #6:	Mar 8 - 10	SilverCreek, WV (finals)	___	___

NOTE: BOTH GS & SL ARE ON SATURDAY AT CRESCENT CUP WEEKEND

Please confirm your race registration to me **no later** than the Sunday preceding **each** race date. You may do this verbally, by phone, or via e-mail. *Any cancellation after Sunday will be a "no show" for the team.*

Crescent Ski Council (CSC) solicits sponsorship from a number of skiing and ski racing related companies. Some of these companies have requested the names and addresses of CSC racers in order to contact racers directly regarding their products. Please indicate whether you would like this information released or withheld.

I grant PSOC/CSC permission to release the following information only to CSC race program sponsors for their sole use:

- Name, mailing address and email.
- Name and mailing address only (No email).
- Email address only (No name and no mailing address).
- Do not release this information to CSC race program sponsors.

Please read and sign the following:

I understand that skiing and ski racing can be a dangerous sport and that I accept the risks involved as my own. I release the Palmetto Ski & Outing Club, any of its board of directors, or anyone involved in organizing any race activities, from any responsibility should I injure myself in any way, fashion or form.

I understand that I am racing as a member of a team. I understand that if I sign up for a race and cancel without notifying the race director by the Sunday preceding the race, that my "No Show" may cost my team points. I also acknowledge that my "No Show" may result in my exclusion of any other team rebates, and the possible exclusion from special race team events.

Signature: _____ Check #: _____ Date Received: _____

Thank you for being a member of our TEAM! Have a fun and safe race season!

Kent Welke- PSOC Racing Director, 20 Claret Dr, Greenville, SC 29609 (864) 884-9602
 Mike Bopp- PSOC Racing Director, 413 Fox Valley Rd, Anderson, SC 29621 (864) 221-6363
 Email us at: psocracing@gmail.com