

**2018 MT. LA CROSSE SPRING FLING INVITATIONAL
REGISTRATION FORM**

Last Name: _____ First Name: _____

Address: _____

(Street, City, State, Zip Code)

Telephone: _____ EMAIL: _____

Parent Name(s): _____

Gender: Boy _____ Girl _____ Date of Birth _____

Indicate below whether you will attend both days of the event, or only one:

_____ Both days, 3/04-05

_____ Saturday, 3/04

_____ Sunday, 3/05

Age category (**based on Age as of this past Dec. 31st, 2017**). See Fact Sheet Page 1 for the Age Class descriptors.

U12 racers may opt-up to compete as U14's (check the U14 box below if your child is choosing to opt up). No changes after Online Registration is closed!

Check only one Age Class below:

U25 (19-25) _____ U19 (16-18) _____ U16 (14-15) _____ U14(12-13, plus U12 opt-ups) _____

U12 (10-11) _____ U10 (8-9) _____ U8 (7 & under) _____

Program: WJR _____ WIJARA _____ H.S. _____ Other _____

CLUB, SKI AREA, OR SCHOOL AFFILIATION _____

(Clubs: Please be uniform in the way you refer to the name of your club. For example, Holy Hill versus Heiliger Heugel)

Your Coach: _____

Signature of Parent or Guardian: _____
(18+ year-olds may sign for themselves)

Date: _____

Mail this hard copy of your registration along with your waiver and check (payable to 7 Rivers Winter Sports Club) to:

Spring Fling Registration, c/o Susan Bluske
3321 S. 28th Street
La Crosse, WI 54601