



MOUNT HOTHAM FREE SKI CLUB

Phone 0412 369 694 Email martin@mounthothamfreeski.com.au

P.O Box 131 - Flinders - 3929 - Vic - Australia

www.mounthothamfreeski.com.au

PROGRAM REGISTRATION FORM

For Office Use Only
Received By: _____
Date Entered: _____
Entered By: _____
Today's Date: _____

Participants Name	Date of Birth	Age	Gender	Grade	School During Season

Primary E-mail Address (where you want to receive MHFS communications) _____

Father's Name: _____ Phone: (h) _____ (w) _____

Mobile: _____ Email: _____

Mother's Name: _____ Phone: (h) _____ (w) _____

Mobile: _____ Email: _____

Family Mailing Address

No. _____ Street: _____ Town/Suburb: _____ Postcode: _____ State: _____

Name of Participant(s)	Discipline	Name of Program(s)	Program Fee(s)
<i>eg. Leroy Brown</i>	<i>eg. Moguls</i>	<i>eg. All Winter Program</i>	
Membership Fee			
TOTAL			

Payment Type: Credit Card | Direct Transfer (please circle)

Credit Card Information: (scan/email or mail only)

Name on Card: _____

Acct. Number: - - -

Expiry Date: / CCV:

Membership Fee:
Refer to Registration Form.

DIRECT TRANSFER
Free Ski Hotham Inc.
BSB 633 – 000
Acc. No. 152 207 700

Dietary Requirements (Please advise if any)	
Allergies (please advise if any)	
Special Needs (please advise if any)	
Pre-Existing Medical Condition or Injuries (please advise if any)	

My signature below signifies that I have read Mount Hotham Free Ski Club information at www.mounthothamfreeski.com.au and will read it carefully with my family members involved in MHFS and will abide by the policies set forth.

Signature

Date

CANCELLATION POLICY -

MHFS does not give refunds for any reason unless in the event of an injury which occurs while participating in the programs.

A medical certificate must be provided if the participant is unable to continue with the program.

This excludes general illness eg. common cold / virus / flu / headaches / stomach aches / muscular aches and pains.

All refunds and/ or credits are at the discretion of the Director of Programs.