

## POWER TO AUTHORIZE MEDICAL TREATMENT

(UNDER 18 - FORM MUST BE SIGNED BY A PARENT/LEGAL GUARDIAN)

I, the undersigned, or as a parent and/or legal guardian of:

(Attendee name or parent/guardian name of person under age 18) recognize that medical treatment may become necessary in participation with the D-Team, and to avoid delay of any necessary medical treatment and/or that which would alleviate physical injury, hereby empower the staff of Trollhaugen Winter Recreation Area or other designated persons to authorize on my behalf recommended medical treatment of my child by any staff member of any hospital, medical doctor, emergency medical technician, and/or paramedic. This authorization is complete and of itself fully operative upon my signature for the duration of the Trollhaugen D-Team.

Attendee or Parent / Guardian Name

Attendee/Parent/Guardian Sign \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

## Authorization & Release

I, the undersigned, know that skiing is an action sport, carrying significant risk of personal injury. Ski competition, practicing for ski competition, and all of the activities taking place in order to prepare for ski competition are dangerous and physically demanding activities. I know that there are natural and man-made obstacles or hazards. Surface and environment conditions, along with risks, may cause serious injury. I, the undersigned, accept the inherent dangers of physical participation in such skiing activities. I agree that I (and not Trollhaugen Winter Recreation Area, its staff, or volunteers) am totally responsible for my safety while I participate in these activities.

Attendee Name \_\_\_\_\_

Attendee Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent / Guardian Name (If applicable) \_\_\_\_\_

Parent/Guardian Sign (If applicable) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

PRST - STD  
U.S. Postage  
PAID  
Permit NO. 6  
Dresser, WI  
54009



**Trollhaugen**  
SKI \* RIDE \* TUBE

2232 100<sup>th</sup> Avenue • Dresser • WI • 54009

Phone - WI: 715.755.2955 • MN 651.433.5141

Ski & Board Shop - 715.755.2950

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2011-'12 Season of Fun  
Only 50 minutes North of the Twin Cities!



# Trollhaugen

SKI \* RIDE \* TUBE

# TWIN TIP D-TEAM



The TWIN TIP D-Team is geared toward youth interested in improving their New School skills, meeting new friends, & gaining a friendly yet competitive edge at surrounding metro area slopes.

# go Troll

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Troll\_Tri-Fold\_D-Team\_Twin\_Tips\_0911

# GO To The TROLL!

## FREESTYLE TWIN TIP D-TEAM

Training & Competition in Big Air, Slope Style, & Twin Tip Cross (Skiers 7-18)

The TWIN TIP D-Team is geared toward youth interested in improving their New School skills, meeting new friends, & gaining a friendly yet competitive edge at surrounding metro area slopes.



### NEW SCHOOLERS PROGRAM:

#### BIG AIR:

Tricks performed over 4, 8, and 12-foot jumps. (Competitor's choice)

#### SLOPE STYLE:

Tricks performed during a run. These tricks may consist of ground work, spring ollies, 180's, etc. They may also include air tricks that utilize obstacles within the runs' boundaries.

#### TWIN-TIP CROSS:

A head-to-head race where a group of Twin Tippers start simultaneously, and must navigate a course which may include rollers, banks, and/or small jumps.

# TWIN TIP D-TEAM

### SCHEDULE:

Training @ Troll runs 1PM - 4:30PM  
Competitions begin at 9AM

NOV. 13: OPEN HOUSE/Q&A - 3PM @ TROLL

DEC. 11: TRAINING @ TROLL

DEC. 18: TRAINING @ TROLL

JAN. 8: TRAINING @ TROLL

**JAN. 15: COMPETITION @ WILD MTN.**

JAN. 22: TRAINING @ TROLL

**JAN. 29: COMPETITION @ AFTON ALPS**

FEB. 5: TRAINING @ TROLL

**FEB. 12: SKIER CROSS @ TROLL**

FEB. 19: TRAINING @ TROLL

**FEB. 26: CHAMPIONSHIPS @ BUCK HILL**

### EVENTS:

FROSTBITE RAIL SERIES -  
Friday Nights, December - January  
Check Trollhaugen.com for details.

2<sup>ND</sup> SHIFT RAIL JAM SERIES -  
Check Trollhaugen.com for details.

\* REGISTRATION FORMS, EVENT INFO,  
GEAR DEALS AND MORE CAN BE  
FOUND AT TROLLHAUGEN.COM.

# TWIN TIP D-TEAM

## Application

Applications Due by December 6, 2011  
(\$5 Late Registration Fee)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Email: \_\_\_\_\_

Parents Name(s): \_\_\_\_\_

Parents Phone: \_\_\_\_\_  
(Print Clearly)

Male Female (circle one) Age \_\_\_\_ (As of 9/1/2011)

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

**FEES:** \_\_\_\_\_

**COACHING & TRAINING:** \$225 \_\_\_\_\_  
(Lift Ticket Not Included)

ADDITIONAL FAMILY MEMBER: \$175 \_\_\_\_\_

-OR-  
One Day Try It: \$45 \_\_\_\_\_

6X Training Only (no Comps.): \$150 \_\_\_\_\_

4X Comps. Only (no training): \$50 \_\_\_\_\_

### SUNDAY SEASON PASS FOR D-TEAM MEMBERS:

AGES 6-12: \$175 \_\_\_\_\_

AGES 13-17: \$225 \_\_\_\_\_

**TOTAL (TRAINING & PASSES):** \$ \_\_\_\_\_

MAIL OR CALL TO REGISTER - OR - FOR MORE INFO:  
Trollhaugen • 2232 100th Ave. • Dresser, WI • 54009  
Phone - WI: 715.755.2955 Ext 223 • MN 651.433.5141 Ext 223

AMOUNT: \$ \_\_\_\_\_ CHECK #: \_\_\_\_\_ - OR -

VISA MASTERCARD (please circle one)

ACCOUNT #: \_\_\_\_\_

EXP. DATE: \_\_\_\_/\_\_\_\_ 3 DIGIT CCV# \_\_\_\_\_

BILLING ZIPCODE \_\_\_\_\_

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