

# 2-Day Nordic Race Clinic

## Nov. 26 & 27, 2011

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

Saturday, Nov. 26: Classic  
Sunday, Nov. 27: Skate

Registration: 8:30am  
Clinics: 9:30am - Noon  
Lunch: Noon - 1pm

*Applications Preferred by Nov. 21, 2011*

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

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

\_\_\_\_\_

Phone: \_\_\_\_\_

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

Male Female (circle one) Age \_\_\_\_ must be 12 yrs +

FEES:	PASSHOLDER	REGULAR
NOV. 27 (Classic):	\$35____	\$40____
NOV. 28 (Skate):	\$35____	\$40____
BOTH DAYS:	\$60____	\$70____

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 \_\_\_\_\_



2232 100<sup>th</sup> Avenue • Dresser • WI • 54009  
Phone - WI: 715.755.2955 • MN 651.433.5141  
Ski & Board Shop - 715.755.2950  
www.Trollhaugen.com • © 2011-2012



# Trollhaugen

SKI \* RIDE \* TUBE

# Nordic Race Clinic

## Nov. 26 & 27, 2011



\* 2 - Days Of On-The-Snow Training

\* Clinics by Top XC Coaches

\* Video Evaluation \* Wax Clinics

\* Demo Ski Days \* Lunch Included

# go Troll

www.Trollhaugen.com

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# GO To The TROLL!

... because Trolls Cross The Trolliest Country!

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### ABOUT TROLL HOLLOW

Troll Hollow is Trollhaugen's beautiful, 2.5km XC trail that peacefully winds over the hills and through the woods.

Our trail is perfect for training and recreation, creating a simply enjoyable day on your cross-country skis. Groomed daily for classic and skate skiing, Troll Hollow offers 100% snowmaking and guaranteed snow.

Early morning practice is available from 7-9am as soon as snow is made! The trail is also fully lit for evening skiing. Night skiing is a wonderful experience too great to miss!

Visit Trollhaugen.com for info and a calender of events.

If you would like to use the trail for your race team, please contact Rose, our Group Sales Director.

Wisconsin - 715.755.2955 Ext. 223  
Minnesota - 651.433.5141 Ext. 223  
Email: [rose@trollhaugen.com](mailto:rose@trollhaugen.com)

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### COACHES:

### Authorization & Release

I, the undersigned, know that skiing is an action sport, carrying significant risk of personal injury. Ski racing, practicing for ski racing, and all of the activities taking place in order to prepare for ski racing 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 Cross Country activities. I agree that I (and not Trollhaugen Winter Recreation Area, it's 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

### POWER TO AUTHORIZE MEDICAL TREATMENT

(IF YOU ARE UNDER 18, THIS 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)

I recognize that medical treatment may become necessary in the XC Race Clinic, 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 XC Race Clinic.

\_\_\_\_\_  
Attendee or Parent / Guardian Name

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

\_\_\_\_\_  
Insurance Company

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Doctor's Name

\_\_\_\_\_  
Phone Number

Trollhaugen.com • WI - 715.755.2955 • MN - 651.433.5141

Trollhaugen Ski & Board Shop - 715.755.2950

