



**WJR/WIJARA RACERS....
WELCOME TO THE SPRING CHAMPIONSHIP RACE
AT MT. LACROSSE!**

The SIXTH ANNUAL SPRING CHAMPIONSHIP RACE AT MT. LACROSSE WILL BE HELD MARCH 6-7, 2010. The management and staff of Mt. La Crosse are pleased to welcome the WJR and WIJARA racers to the sixth annual Spring Fling. We look forward to a good time and a fun racing experience again this season. Hope you will all come again and bring your fellow ski racers. The registration form is posted on the Mt. La Crosse web site along with the release of Liability form and the informational fact sheet. The registration and release of liability forms can be downloaded from the Mt. La Crosse web site (www.mtlacrosse.com). A printed copy of the registration form and the release of liability, along with your check for the race fee in the amount of \$35.00, payable to the La Crosse Ski Club, must be postmarked to Sue Bluske, Treasurer, La Crosse Ski Club, 3321 So. 28th Street, La Crosse, Wisconsin, 54601, no later than Monday, March 1st. REGISTER EARLY! We will accept the first 200 racers registered. We need to know as early as possible how large the field will be so that we can order the bibs and make other arrangements. Sue can be contacted at suebluske@yahoo.com.

We will schedule two races of GS (4 runs) on Saturday. If a racer is DNF or DQ in the first run, that racer will still race the second run. To qualify, however, for a race result in a given event, the racer must complete both runs. On Sunday, we will schedule three runs of Slalom. The best two of three runs will constitute a race.

This schedule should allow ample time for the Award Ceremony and an early start home.

Cost for the two-day lift ticket is \$55.00. Discounted lift tickets will be available for family members—Adult \$67 and Junior \$61.

Medals per event will be awarded to the top five finishers in each age category (J1 through J6). The races will start at 9 AM each day with course inspection starting at 8:15 AM.

Registration packets can be picked up at Mt. La Crosse starting at 7:00 AM on Saturday morning. Each racer will receive a souvenir bib. Souvenir T-shirts will be available for purchase at a reasonable cost on a first-come—first-served basis.

Reserve your lodging early! The following motels have offered racer discounts:

Grandstay	608-796-1615	Best Western	608-781-7000
Guest House Motel	608-784-8840	Holiday Inn Hotel & Suites	888-784-4444
Super 8	608-781-8880	Hampton Inn Onalaska	608-779-5000
Radisson Hotel	608-784-6680	Welch Motel	608-788-1300
Stoney Creek Inn	608-781-3060	Courtyard Marriott	608-782-1000

Volunteers (gate judges, result board, course workers) will be needed. Please indicate your willingness to help on the registration form or email Lois Storlie, Race Chairperson, at jstorlie@charter.net. If you wish a specific job, let us know.

If you have any questions, please contact Lois Storlie at jstorlie@charter.net, Sue Bluske at suebluske@yahoo.com, or Darcie Breidel at dbreidel@mtlacrosse.com. Mt. La Crosse phone number is 608-788-0044.



**WJR/WIJARA SPRING FLING CHAMPIONSHIP RACE
REGISTRATION FORM
MT. LA CROSSE
MARCH 5-6, 2010**

Last Name: _____ **First Name:** _____

Address: _____
(Street, City, State, Zip Code)

Telephone: _____ **EMAIL:** _____

Parents Name: _____

Date of birth: _____ **Gender: Boy** _____ **Girl** _____

USSA Member #, if available: _____

Program: WJR _____ **WIJARA** _____

Club: _____ **Coach:** _____

Signature of Parent or Guardian: _____ **Date:** _____

Print this registration form and the Release of Liability form, sign and date as indicated and include with your check for the race fee. Both forms must be completed and the payment must be made in order for the athlete to race.

Send both forms and your check to:

**Sue Bluske, Treasurer
La Crosse Ski Club
3321 So. 28th Street
La Crosse, WI 54601**

Volunteer race workers will be needed!! Please indicate your willingness to assist with this race. If you wish a specific job, indicate your choice.

I will be willing to help with the race: _____

Job preference: _____

If you have any questions, you can email Lois Storlie at jstorlie@charter.net

RELEASE OF LIABILITY

I, the participant and/or parent or guardian of a participant in the WJR/WIJARA Spring Championship Race at Mt. La Crosse, know, understand and agree that skiing and ski racing involve both known and unknown risks, dangers and hazards. These risks, dangers and hazards include, but are not limited to, changing weather and snow conditions, changing trail conditions, variations in steepness and terrain, natural and man-made obstacles and structures, equipment failure, collisions with objects of structure, being struck by skiers/riders or equipment, and exceeding my own abilities. Ski terrain may have moguls, forest growth, trees, rocks and debris, lift towers, snowmaking equipment and moving or stopped skiers/riders.

I agree, as a condition of being allowed to use the ski area facility and premises, and to participate or for my child to participate in the above ski race, that I freely accept and voluntarily assume all risks of person in jury or death or property damage. I HEREBY RELEASE, INDEMNIFY AND HOLD HARMLESS MT. LACROSSE, INC. AND THEIR AGENTS, EMPLOYEES, VOLUNTEERS, DIRECTORS, OFFICERS AND SHAREHOLDERS FROM ANY AND ALL LIABILITY FOR PERSONAL INJURY OR PROPERTY DAMAGE WHICH RESULTS IN ANY WAY FROM THEIR NEGLIGENT ACTS OR OMISSIONS, THE CONDITIONS ON OR ABOUT THE PREMISES AND FACILITIES. THE OPERATIONS OF THE SKI AREA, INCLUDING BUT NOT LIMITED TO, GROOMING, SNOW MAKING, SKI LIFT OPERATIONS, SKI PATROLS OPERATIONS, ACTIONS OR OMISSIONS OF EMPLOYEES, VOLUNTEERS OR AGENTS OF THE AREA, OR MY PARTICIPATION OR MY CHILD'S PARTICIPATION IN SKIING OR OTHER ACTIVITIES AT THE AREA, ACCEPTING FOR MYSELF OR MY CHILD THE FULL RESPONSIBILITY AND LIABILITY FOR ANY AND ALL SUCH DAMAGE OR INJURY OF ANY KIND, WHICH MAY RESULT.

Further, I agree to visually inspect the ski trail prior to the event in which I will be participating. If I am not willing to accept the risk of injury associated with the event, I will not participate.

In signing below, I certify that I have read, understand and accept this Release of Liability Agreement. I also understand this Release of Liability to be legally binding.

(Signature of Parent or Guardian)

(Date)

(Please print your name)

(Please print your team name)

(Signature of Racer, if 18 years of age)