



Joining the Perisher Ski Patrol - Ski/Board Clinic Assessment Booking Form

Name:

My requested Clinic Assessment Booking Date:

Dates for 2010

Saturday 10 July 2010

Sunday 11 July 2010 as the Orientation/Induction day for successful candidates

Saturday 7 August 2010

Sunday 8 August as the Orientation/Induction day for successful candidates

1. I have completed the Membership Application and have sent it to the Secretary or Recruitment Officer
2. I have obtained a signed Prequalification Ski or Boarding Competency Certificate (which is enclosed)
3. I have enclosed a cheque made out to Perisher Ski and Snowboard School or signed the credit card authorisation on the following page
4. I meet the criteria to join the Perisher Ski Patrol
5. I have signed the Perisher Snowsports Waiver and Release (which is enclosed)

.....
signature

Please complete the payment authorisation on the following page.

All correspondence is addressed to:

The Recruitment Officer
Perisher Ski Patrol
P.O. Box 4702
Sydney NSW 2001



Perisher Ski and Snowboard School

Credit Card Debit Authority

Name on Credit Card: _____

Credit Card Number:

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Credit Card Type: _____

Verification Number: _____

Expiry Date: ____ / ____ Amount: \$ _____

I authorise Perisher Ski and Snowboard School to debit my credit card for the above amount.

Name (Please Print): _____

Signature: _____ Date: ____ / ____ / ____