

River City Water Ski Show Team REGISTRATION Form - 2023

Mission: To provide an organized environment which encourages young people and adults to develop their water-skiing skills in preparation for ski shows and competitive show skiing.

Member Name	Cell number	Birthdate	Email	Ski or Nonski	Fee

HOME Address:				
Home Phone:		Main Email	:	
Emergency Conta (Name, Relationshi				
Hospital preference	e:			
Please list team member's allergies:				

Please pay your annual USA and Wisconsin Water Ski Federation (WWSF) memberships directly to those organizations at www.usawaterski.org and www.waterski.org

	Individual (u25)	Individual (25+)	Family	Non-Skiing
RCWST Dues	\$150	\$150	\$300	FREE
River City Fundraisers	\$100	\$100	\$100	FREE
USA Dues	\$60	\$90	\$190	\$60 or \$90
WWSF Dues*	\$15	\$15	\$30	\$15
TOTAL Dues	\$320	\$350	\$605	\$75 or \$105

^{***}WWSF Dues Optional- only needed if you plan to participate at the State Tournament***
PAY RCWST DUES and Fundraising Dues DIRECTLY TO RCWST
Venmo: RiverCityWaterSkiTeam-RCWS or pay team treasurer by check/cash.
USA and WWSF PAY ONLINE AS STATED ABOVE

VOLUNTEER: The River City Water Ski Show Team is a volunteer organization. Each family and/or single adult participant is expected to assist with volunteer work (20+hours/ year), which includes helping with show set-up and clean-up and help on scheduled workdays. Members are also expected to participate in fundraisers and committee work in the off-season. This commitment from each member ensures a positive experience for the entire team.

HANDBOOK: The River City Water Ski Club Member Handbook describes important information about the club and the responsibilities of its members. By signing below, I acknowledge I have received the handbook and admit that it is my responsibility to review this manual and ask a board member about any of the material that is unclear to me or if I have any questions that are not answered in the handbook.

Member name (Printed)	Signature (Parent, if member is under 18)	Date
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local medical centers require consent to treat minors. If medical attention is needed, and we cannot reach a parent or guardian, the undersigned serves as permission to seek and authorize medical treatment. Parental signature is required for minors.			
Signature:	Date:		
LIABILITY: As in most sporting activities, water ski team comes with a risk of injury/ death. I, the undersigned, for myself, my heirs, personal representatives and assigns, hereby release and forever discharge the River City Water Ski Show Team (RCWS), its members, sponsors, officers, agents, servants and all persons volunteering their services for RCWS sponsored activities, of and from any and all rights, claims, demands and actions whatsoever which I may have for any and all loss, damages or injury sustained by me or my personal equipment during any such RCWS sponsored activities. Parental signature is required for minors.			
Signature:	Date:		
MINORS (parental signature required): It is my understand place my child into acts as he/she sees fit to the best of my as a parent to inform the Show Director(s) if I DO NOT war (e.g. jumping, top of 4-high pyramid, etc.).	child's ability. It is my responsibility		
Signature:	Date:		
PHOTOGRAPHY/ VIDEO RELEASE: Photos/video footag listed above may be used for marketing and/or promotiona Ski Show Team.	•		
Signature:	Date:		

MEDICAL: As in most sporting activities, there is a risk of injury requiring medical attention. We strongly recommend that a parent or legal guardian be present at all practices and shows, as