



MOUNTAINCREEK

200 Route 94, Vernon Township, New Jersey 07462
mountaincreek.com

Ski Program Registration 2016/2017

Mountain Creek Resort Adaptive Sports Program at Mountain Creek

Today's Date

____ / ____ / ____

I am a Military Veteran

Name

Last

First

Initial

Address

Street

City

State

Zip

Contact Info

Home
 Cell
 Work

Home
 Cell
 Work

Primary Phone Number

Alternate Phone Number

email Address

Print Clearly!
email

Gender

Male

Female

Date of Birth

Age

Emergency Contact

Home
 Cell
 Work

Home
 Cell
 Work

Name

Primary Phone Number

Alternate Phone Number

Disability

SCI
 Cerebral Palsy
 Amputee
 MS

CVA/Head Injury
 Blind/Visual
 Other _____

Height/Weight

Height

Weight

Parent/Guardian
(if under 18)

Does the participant have a legal guardian or legal representative? Yes No
If the answer is YES, the participant's legal guardian or legal representative must sign the waiver & release of liability agreement on behalf of the participant (on reverse of this page).

Parent/Guardian
Name & Phone

Home
 Cell
 Work

Home
 Cell
 Work

Name

Primary Phone Number

Alternate Phone Number

Skier Application

(Please Fill out Reverse)

____/____/____
Today's Date

Disability Evaluation

Adaptive Sports Program at Mountain Creek

Name _____
Last First Initial

Age _____
Date of Birth Male Female _____
Date of Injury/Onset

Disability SCI Level _____
 Complete
 Incomplete
 Amputee _____
 CVA
 R hemi
 L hemi
 Other

CP Type _____
 Hemi _____
 Lower _____
 Upper _____
 Single _____
 TBI
 R Hemi _____
 L Hemi _____
 Other _____
Cognition _____ Describe _____

Other Disabilities or _____
Additional Comments: _____

Seizures Yes Grand Mal Controlling Med: _____
 No Petit Mal _____
Date Last Seizure _____

Medications _____

Physician Name _____ Phone _____

Disability Evaluation

Initial Assessment & Lesson 2016

Use this page for first lesson of season.

Alerts & Cautions

Date: _____

Student Name: _____

Evaluators: _____

Capacity

- **Physical:** strength, balance, stance, gait...
- **Attitude:** motivated, fearful, happy, oppos...
- **Intellectual:** awareness, language, memory...
- Other Observations

Details

Describe what is impacted.

Lesson Input

Instructors: Primary _____ Secondaries _____

Lesson Goals

Today _____

Longterm: _____

Today's lesson goals achieved? Yes No Partial _____

Starting Skill Level: 1 2 3 4 5 6 7 8 9

Equipment

Equipment: Owns Rents

Mono Ski Bi-Ski:

model _____ # _____

color _____ snow ski: _____

Outriggers # _____

Rentals #/size _____

Ski Bra type _____

Tether _____

Details

Describe settings, modifications, seating adj., issues, & other pertinent information helpful to lessons.

Lesson Outcomes

Progression (worked on today)

- Equipment/Flatland Drills
- Gliding Wedge
- Wedge Turn - 1 Direction
- Linked Turns (circle):
Wedge/W. Christie/Open Parallel/Parallel

Skills (worked on today)

- Balance
- Rotary Movements
- Edge Control
- Pressure Control

Chairlift Load/Unload

- Assist Independent

Environment

Snow Conditions _____

Trails/# Runs _____

Skier Level 1 2 3 4 5 6 7 8 9

Duration _____

Details

What you did out there.

Progression & Skill Development (focus on teaching, teaching adaptations, tricks, etc.).

Next time (things to try, what needs reinforcement, what can be progressed, things to be aware of).

Lesson Input

Instructors: Primary _____ Secondaries _____

Goals Today _____

Today's lesson goals achieved? Yes No Partial _____

Starting Skill Level: 1 2 3 4 5 6 7 8 9

Equipment

Mono Ski Bi-Ski:
model _____ # _____
color _____ snow ski: _____
Outrigger # _____
Rentals #/size _____
Ski Bra Type _____
Tether _____

Lesson Outcomes

Progression (worked on today)
 Equipt./Flatland Drills Gliding Wedge
 Wedge Turn - 1 Direction
 Linked Turns (circle):
Wedge/W. Christie/Open Parallel/Parallel
Skills (worked on today)
 Balance Rotary Movements
 Edge Control Pressure Control
Skier Level 1 2 3 4 5 6 7 8 9
Chairlift Load/Unload
 Assist Independent

Environment

Snow Condition _____ Trails/# Runs _____ Duration _____

Details

Describe settings, modifications, seating adj., issues, & other pertinent information helpful to lessons.

Progression & Skill Development (focus on teaching, teaching adaptations, tricks, etc.).

Next time (things to try, what needs re-enforcement, what can be progressed, things to be aware of).

Lesson Input

Date: _____ Instructors: Primary _____ Secondaries _____

Goals Today _____

Today's lesson goals achieved? Yes No Partial _____

Starting Skill Level: 1 2 3 4 5 6 7 8 9

Equipment

Mono Ski Bi-Ski:
model _____ # _____
color _____ snow ski: _____
Outrigger # _____
Rentals #/size _____
Ski Bra Type _____
Tether _____

Lesson Outcomes

Progression (worked on today)
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Skier Level 1 2 3 4 5 6 7 8 9
Chairlift Load/Unload
 Assist Independent

Environment: Snow Condition _____ Trails/# Runs _____ Duration _____

Details

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