

SAINT BRIGID OF KILDARE SKI CLUB



I am/We are interested in joining the SAINT BRIGID OF KILDARE SKI CLUB as a skier/
snowboarder.

Name _____ Age _____

Ski Club Bus Rider ____ Yes ____ No

Name _____ Age _____

Ski Club Bus Rider ____ Yes ____ No

Name _____ Age _____

Ski Club Bus Rider ____ Yes ____ No

Name _____ Age _____

Ski Club Bus Rider ____ Yes ____ No

I am/We are interested in joining the SAINT BRIGID OF KILDARE SKI CLUB as a chaperone.

Name _____ Age _____

Chaperone ____ Yes ____ No

Ski Club Bus Rider ____ Yes ____ No

Name _____ Age _____

Chaperone ____ Yes ____ No

Ski Club Bus Rider ____ Yes ____ No

Contact Person: _____

Home Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

****Please note that email will be the preferred method for weekly communication****

Return this form (Attention Stacie Williams) with check for bus fee to the Saint Brigid of Kildare
Elementary School Office (payable to St. Brigid of Kildare)