

**CMC Boulder Group**  
**Winter Camping/Structures Clinic**



Date \_\_\_\_\_

Name \_\_\_\_\_ CMC Group \_\_\_\_\_

Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Home \_\_\_\_\_ Work \_\_\_\_\_

Check number \_\_\_\_\_ Amount \_\_\_\_\_

Will you be a CMC member in good standing through January 2010? Yes No

Will you be renting skis, boots or other equipment for this clinic? Yes No

"Are you planning on skiing or snowshoeing \_\_\_\_\_ skiing \_\_\_\_\_ snowshoeing

**Please describe your skiing experience:**

"I've skied on cross-country skis for \_\_\_\_\_ years and I ski about \_\_\_\_\_ days per year"

"I've skied on alpine skis at resorts for \_\_\_\_\_ years and I ski about \_\_\_\_\_ days per year"

"On alpine skis at a resort, I ski mostly on"

Green Blue Black (never ski at resorts)

"I've been on Telemark skis \_\_\_\_\_ resort days \_\_\_\_\_ backcountry days"

"I'd rate my Telemark skills as:"

Never-ever Beginner Adv\_beginner Intermediate Adv\_intermediate

**To Send Application:** Please complete this application and mail it with your check or money order for \$30.00 (payable to: **BMS**) to the **CMC/WinterCamping, Table Mesa Shopping Center, 633 South Broadway, Unit N, Boulder, CO 80305**

To sign up, or for questions about this program, contact Willy Gully (303 939 8382) or [wgully@ball.com](mailto:wgully@ball.com)