

**CMC Boulder Group
Cross Country Ski School**



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

The ski school instructors are all volunteers who love to cross country ski and want to pass on our love of the sport. Most of us learned when we were adults and we remember how awkward it felt at first. In order to help you learn as fast as possible, we want to find out how comfortable you are on cross-country skis and your general level of fitness so we can put you into a class with others of similar experience. Please take time to answer the questions below about your experience, skill level, fitness and gear..

A. Cross country skiing experience and gear:

1. Have you cross-country skied before? ____ If so:
 - a) For how many years? _____
 - b) How recently? _____
 - c) How many days/year do you ski? _____
 - d) List 3 places in Colorado where you have cross-country skied most recently (or if you have recently moved here, where you have skied in another state)

 - e) Have you skied:
 - on flat terrain using light touring gear _____
 - on prepared tracks _____
 - on unprepared tracks in backcountry _____
 - on variable terrain and can control speed and make some turns on downhills _____
2. If you own cross-country skis and/or boots you plan to use in the class:
 - a) do you have waxless skis? ____ metal edged skis? ____
 - b) describe your boots:

B. Downhill skiing experience

Do you downhill ski? ____ If so, can you control your speed with a snowplow? ____
Can you ski parallel with carved turns? ____

C. Backcountry experience

Are you comfortable being in the backcountry? _____

If no, explain any concerns: _____

D. Conditioning - Please help us understand your level of conditioning for cross-country skiing –

1. What do you do for aerobic conditioning? _____ How many times/week? _____
2. Please rate your fitness level on a scale of 1 to 5 with 1 being least fit and 5 being most fit ____
3. What were the hardest hikes you did last summer? _____
4. Did you do any backpacking last summer? _____
5. Do you lead CMC hikes? _____
6. How do you rate your balance? _____
7. Add any comments you would like us to know about your level of fitness or conditioning:

E. Health Concerns

Some health conditions can limit a person’s ability to cross-country ski or require special attention by instructors. These include problems with ankles, knees or joints, heart conditions, osteoporosis, circulatory problems such as Reynaud’s syndrome and Chillblains, asthma, diabetes, and hypoglycemia. If you have these conditions, please discuss with your medical professional whether you should take the class and what precautions are advisable and discuss them with your instructor(s) at the field trips.

F. Objectives: What are your objectives in taking this course: _____

Please give us other any comments that will help us place you in an instruction group that best meets your needs: _____

<p>To Send Application: Please complete this application and mail it with your check or money order for \$40.00 (payable to: BMS) to the CMC/Cross Country, Table Mesa Shopping Center, 633 South Broadway, Unit N, Boulder, CO 80305</p>
--

For questions about this program, contact Bob Olsen at xcski@cmcboulder.org