

THE NH CHAPTER AMC ANNUAL WINTER WORKSHOPS

Please select which workshop you wish to attend!

- #ONE- Jan 20-22 2017
- #TWO- Feb 24-26 2017

APPLICATION FORM

NAME: _____ **PHONE #:**(____) _____
(only one name per application)

STREET ADDRESS: _____ **E-MAIL:** _____
(please print clearly)

TOWN, CITY, STATE, & ZIP: _____
(don't forget the ZIP code!)

VEHICLE LICENSE PLATE NUMBER AND STATE: _____

AMC MEMBER (yes / no) **Membership #:** _____ **AGE:** _____
(must be 18 or older)

CHECK # AND \$ AMOUNT: \$160 per member or \$180 per non member _____



WHAT GROUP WOULD YOU LIKE TO BE IN? (Choose only one)		Check Here
A	INTRODUCTION TO WINTER WILDERNESS TRAVEL	
B	INTERMEDIATE SNOW SHOEING	
C	ADVANCED WINTER WILDERNESS TRAVEL	
D	INTRODUCTION TO BACKCOUNTRY SKIING 101	
E	INTERMEDIATE BACKCOUNTRY SKIING	
F	ADVANCED BACKCOUNTRY SKIING	
G	DOWN MOUNTAIN SKING <i>(February only)</i>	
H	LEADERSHIP AND MOUNTAIN SKILLS	
I	INTRODUCTION TO WINTER BACKPACKING <i>(January only)</i>	
J	INTERMEDIATE WINTER BACKPACKING <i>(February only)</i>	

QUESTIONNAIRE

Please answer the following questions as completely and honestly as you can. Your answers are important to us as they help us to ensure that you are placed in a group that is right for you. They also help us in tailoring our instruction to your needs. **Please place a check next to each statement that applies to you.**

Map and compass					
q	Can read and understand symbols on a topographic map.	q	Use map and compass together to find basic bearings on the map.	q	Can lay out and follow a bushwhack route.
q	Can find your elevation on topographical map.	q	Be able to take a bearing from map, transfer to compass and follow that bearing in the woods.		
q	Can pick an object and determine what direction it is from you.	q	Can take back bearings.		
Snowshoeing & Winter Wilderness Travel					
q	Never been on snowshoes.	q	Can snowshoe up to five miles on moderate to hilly terrain.	q	Can snowshoe six or more miles at a moderate to fast pace with sustained steep uphill climbs.
q	Have been on snowshoes a few times.	q	Have some above tree line experience.	q	Snowshoe in all conditions, many trips above tree line & experience breaking trail.
q	Have never been above treeline.	q	Have hiked with crampons a few times.	q	Have hiked with crampons for two or more continuous miles.
				q	Have some experience using an ice ax.
Winter Backpacking					
q	Three to four nights in three seasons going 5-10 miles per day over moderate to steep terrain, but no winter experience.	q	One to two nights in winter going 3-8 miles per day over moderate to steep terrain.	q	Winter trips of five nights or more, 6-10 miles per day over moderate to steep terrain on snowshoes.
q	One to two nights in winter with little or no hiking.	q	Three to four nights in winter going 3-8 miles per day over moderate to steep terrain on snowshoes.		
Backcountry Skiing					
q	First or almost first time on cross-country skis.	q	Can execute wedge, side step, kick turn and herringbone with confidence.	q	Able to do strong wedge turns on all terrain and working on parallel and/or telemark turns.
q	Most cross-country ski experience on level, open or groomed trails.	q	Able to do a strong wedge to a stop on most terrain.	q	Have confidence skiing on backcountry terrain.
q	Starting to learn to wedge.	q	Have confidence skiing on backcountry terrain.	q	Have used Climbing skins.
q	Some alpine ski experience.	q	Extensive alpine ski experience.		

ALL GROUPS

Give some examples of relevant hiking, snowshoeing, backpacking or skiing experience that you have had within the last two years. _____

Describe what you do regularly for exercise? _____

What are you hoping to get out of this workshop? _____

Can you stand around in your boots for an hour and half at twenty degrees without getting cold toes? _____

SKI GROUPS ONLY

What ski equipment will you be bringing? _____

LEADERSHIP GROUP ONLY

Have you had any previous leadership experience?(outdoors or otherwise) _____

GENERAL INFORMATION ALL GROUPS

Do you have any medical problems or physical limitations that the staff should be aware of for your safety?
Yes? _____ No? _____

If yes, please explain. _____

List a person to contact in case of an emergency; you may list more than one if necessary.

Name: _____

Street Address: _____ City: _____

State: _____ ZIP code: _____ Telephone #(s): (_____) _____

Please list dietary limitations or concerns below. We will try to accommodate you, but we may ask you to bring any special foods that you would require. *Include food allergies.*

Do you want your contact information shared with other workshop participants for carpooling purposes? _____

Would you want your contact information put on a handout to share with participants at this workshop? _____

***** AMC policy requires that participants in all activities sign a liability release agreement. You can find the release form on the opposite side of the page. Please read it over carefully, fill out and sign on the first line, and return it with your completed application form. Please include the dates for the workshop you plan to attend in the Trip Date Line on the top of the form. Completion of the form is mandatory for participation in this workshop. Thank you for your understanding.**

Chapter / Activity: NH Chapter Workshop **Leader(s):** Rick Silverberg **Trip Workshop Date(s):** _____

AMC VOLUNTEER-LED ACTIVITIES
ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AGREEMENT

PLEASE READ THIS ENTIRE DOCUMENT (hereafter 'Document') CAREFULLY BEFORE SIGNING. All participants must sign this Document.

In consideration of the services of the Appalachian Mountain Club, Inc., a charitable, not-for-profit corporation, organized and existing under the laws of Massachusetts, and its chapters, including all officers, directors, employees, representatives, agents, independent contractors, volunteers (including leaders and co-leaders), members and all other persons or entities associated with it (collectively referred to in this Document as 'AMC'), **I acknowledge and agree as follows:**

AMC volunteer-led educational and/or adventure activities may include, but are not limited to hiking, backpacking, camping, biking, skiing, maintenance of trails and facilities, mountaineering, rock and ice climbing, canoeing, kayaking, sailing, use of AMC huts or other facilities and transportation or travel to and from activities (referred to in this Document as 'activities' or 'these activities'). **The leaders of these activities are volunteers. They are not paid professional guides or leaders. In all activities, all participants share in the responsibility for their own safety and the safety of the group.** Participants take responsibility for having appropriate skills, physical conditioning, equipment and supplies for these activities.

These activities include inherent and other risks, hazards and dangers (referred to in this Document as 'risks') **that can cause or lead to injury, property damage, illness, mental or emotional trauma, paralysis, disability or death to participant or others.** Some, but not all of these risks include: hazardous and unpredictable ground, water or weather conditions; misjudgments made by leaders, co-leaders, participants or others; travel in remote areas that can cause potential delays or difficulties with transportation, evacuation and medical care; equipment that can fail or malfunction; the potential that the participant or others (e.g. co-participant, driver, medical and rescue personnel) may act carelessly or recklessly. I understand that AMC staff, leaders or other personnel cannot assure participant's safety or eliminate any of these risks. **Participant is voluntarily participating with knowledge of the risks. Therefore, participant assume and accept full responsibility for the inherent and other risks (both known and unknown) of these activities, and for any injury, damage, death or other loss suffered by participant, resulting from those risks, and/or resulting from participant's negligence or other misconduct.**

I agree to release and not to sue AMC (as AMC is defined above) in regard to any and all claims, liabilities, suits, or expenses (including reasonable costs and attorneys' fees) (hereafter collectively 'claim' or 'claim/s'), **including claim/s resulting from AMC's negligence (but not its gross negligence or intentional or reckless misconduct),** for any injury, damage, death or other loss to me or my child, in any way connected with my or my child's enrollment or participation in these activities, or my use of AMC equipment, facilities or premises. **I understand I agree here to waive all claim/s I or my child may have against AMC,** and agree that neither I, my child, or anyone acting on my or my child's behalf, will make a claim against AMC.

I agree that the substantive laws of Massachusetts govern this Document and all other aspects of my relationship with AMC, and that any mediation, suit, or other proceeding must be filed or entered into only in Massachusetts. **This Document is intended to be interpreted and enforced to the fullest extent allowed by law. Any portion of this Document deemed unlawful or unenforceable shall not affect the remaining provisions, and those remaining provisions shall continue in full force and effect.**

PARTICIPANT AGREES: I HAVE CAREFULLY READ, UNDERSTAND AND VOLUNTARILY SIGN THIS DOCUMENT AND ACKNOWLEDGE THAT IT SHALL BE EFFECTIVE AND BINDING UPON ME, MY MINOR CHILDREN AND OTHER FAMILY MEMBERS, AND MY HEIRS, EXECUTORS, REPRESENTATIVES AND ESTATE.

Name	Signature	Date	Emergency Contact Phone #
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Please return this form when you mail in your registration materials.

If you have chosen to use this printed and complete the pdf file rather than registering online at AMC_registration.ccntr.org

Please send completed application to Larry Yetter, 15 Westgate Rd, Mont Vernon, NH 03057 with check for \$160 members or \$180 non-members made out to NH chapter AMC Excursions