

SHAMES MOUNTIAN SKI CLUB 2011-2012 PAYMENT FORM

Payment:

Athlete's name: _____ Athlete's D.O.B. _____

Program type: _____

Payment amount: \$ _____ (add \$5 for debit or credit card if available)

Payment method: _____

Forward To:

Shames Mountain Ski Club

Box 157

Terrace BC

V8G 4A6

Or

r.peters@telus.net

Or

Drop-off at Remax, attn. Rick McDaniel