



SPORTS for Exceptional Athletes

**Winter Games
Team Registration Packet
Winter Season 2020**

Mail Team Registration Form to:
SPORTS for Exceptional Athletes
9575 Aero Drive Suite B
San Diego, CA 92123

Phone: 858-565-S4EA (7432)
E-mail: sds4ea@gmail.com
Website: www.s4ea.org
Fax: 858-565-7431

Sports: **Cross Country & Downhill Skiing, Snowboarding and Snowshoeing**

Date: February 4-6, 2020

Time: Tuesday 1pm – Thursday 2pm

Where: Cedar Lake Camp in Big Bear



Take Hwy 18-Big Bear Blvd, right on Tulip Lane, right on Mill Creek Rd
Snow Valley in Running Springs for downhill skiing and snowboarding

Fees: \$140.00 for each cross country ski & snowshoe athlete, coach & chaperone
(covers food, lodging, insurance, and awards)

\$150.00 for each downhill ski & snowboard athlete, coach & chaperone
(covers food, lodging, insurance, lift tickets, and awards)

Volunteers must buy their own lift tickets (probably \$15-\$20 per day)

Rules: SPORTS for Exceptional Athletes Cross Country & Downhill Skiing,
Snowboarding & Snowshoeing Rules

Out-of-town teams are invited to practice and compete in our SPORTS for Exceptional Athletes Winter Games in Cross Country & Downhill Skiing, Snowboarding & Snowshoeing. Divisions will be made based on times.

The Team Registration Form and Team Registration Fee are due by January 14, 2020. Even if your team does not have all the signatures, send in by the due date a copy of the Team Registration Form with printed names, sport, manager's name and address information, then bring to the tournament the Team Registration Form with signatures. Map and final information will be mailed upon receipt of the Team Registration Form and Team Registration Fee.

Tentative Schedule of Events

Tuesday, February 4, 2020

1:00pm - 5:00pm Team Registration at Cedar Lake Camp in Big Bear
5:00pm - 6:30pm Dinner at Cedar Lake
7:00pm - 9:00pm Evening Activity at Cedar Lake

Wednesday, February 5, 2020

7:00am - 8:30am Breakfast at Cedar Lake
9:00am - 12:00pm Practice-CC & DH Ski, Snowboarding & Snowshoeing
11:30am - 1:00pm Lunch at Sports Location
1:00pm - 4:30pm Time Trials- CC & DH Ski, Snowboard & Snowshoe
5:00pm - 6:30pm Dinner at Cedar Lake
7:00pm - 9:00pm Evening Activity at Cedar Lake

Thursday, February 6, 2020

7:00am - 8:30am Breakfast at Cedar Lake
9:00am - 12:00pm Final Competition-Cross Country & Downhill Skiing, Snowboarding & Snowshoeing
12:00pm - 1:30pm Lunch/Awards at Sports Location
2:00pm Teams Depart

Lodging, Cross Country Skiing, and Snowshoeing take place at Cedar Lake Camp in Big Bear.

Downhill Skiing and Snowboarding take place at Snow Valley in Running Springs.

SPORTS for Exceptional Athletes (S4EA) is a sports program serving athletes with and without developmental disabilities ages 5 through adult in San Diego County.

The purpose of SPORTS for Exceptional Athletes is to create enhanced opportunities for people with and without disabilities to interact and form lasting bonds of friendship through shared sports and recreational activities in their community.

For more information, call SPORTS for Exceptional Athletes at 858-565-S4EA (7432).



SPORTS
for Exceptional Athletes

9575 Aero Drive Suite B, San Diego, CA 92123 * Phone: 858-565-7432 * E-mail: sds4ea@gmail.com * Website: www.s4ea.org

WINTER GAMES TEAM REGISTRATION FORM (Cross Country & Downhill Skiing, Snowboarding & Snowshoeing)

Enclosed is \$_____ Team Reg. Fee of \$140 per CC Ski & Snowshoe athlete & coach on Feb 4-6 at Cedar Lake.

Enclosed is \$_____ Team Reg. Fee of \$150 per DH Ski & Snowboard athlete & coach on Feb 4-6 at Snow Valley.

Team Name _____ Colors _____ Email _____

Manager's Name _____ HPhone _____ WPhone _____ Cell _____

Address _____ City _____ St _____ Zip _____

Please Carefully Read Release Below Before Signing. Place A * By Inclusive Athletes Without Disabilities. Sport/Level:
Print or Type Name Signature of Athlete/Parent if Under 18 Date of Birth SBoard, SShoe
CC & DH Ski

1.	_____	_____	__ / __ / __	_____
2.	_____	_____	__ / __ / __	_____
3.	_____	_____	__ / __ / __	_____
4.	_____	_____	__ / __ / __	_____
5.	_____	_____	__ / __ / __	_____
6.	_____	_____	__ / __ / __	_____
7.	_____	_____	__ / __ / __	_____
8.	_____	_____	__ / __ / __	_____
9.	_____	_____	__ / __ / __	_____
10.	_____	_____	__ / __ / __	_____
11.	_____	_____	__ / __ / __	_____
12.	_____	_____	__ / __ / __	_____

Coaches Names _____

RELEASE FORM

I hereby represent and warrant that, to the best of my knowledge and belief, the above named athlete is physically and mentally able to participate in the SPORTS for Exceptional Athletes program involving sports training and competition. I hereby give permission for the above named athlete to participate in the SPORTS for Exceptional Athletes program and adhere to the S4EA Code of Conduct.

In consideration for the SPORTS for Exceptional Athletes program providing the opportunity for above named athlete to participate in the SPORTS for Exceptional Athletes program, I hereby release SPORTS for Exceptional Athletes and its officers, directors, volunteers, agents, contractors, supporters, or any other person associated with SPORTS for Exceptional Athletes, from any and all claims, damage, or injury that the above named athlete may suffer as a result of participation in the SPORTS for Exceptional Athletes program. In addition, I hereby agree to indemnify, defend and hold SPORTS for Exceptional Athletes harmless from any and all claims for loss, damage (including attorneys' fees and costs, including, but not limited to experts and consultants' fees), liability, death, or injury to the person or property arising from or related to the above named athlete's participation in the SPORTS for Exceptional Athletes program.

I assume all risks and hazards involved in, or incidental to, the participation of above named athlete in the SPORTS for Exceptional Athletes program and hereby consent to above named athlete to receive first-aid and/or emergency care by a qualified Emergency Medical Technician or physician in the event of any injury during any SPORTS for Exceptional Athletes program.

I agree to provide all pertinent medical information to SPORTS for Exceptional Athletes and to assist SPORTS for Exceptional Athletes so that adequate precautions can be made and so that appropriate care can be provided to above named athlete during SPORTS for Exceptional Athletes program. I agree to have all of above named athlete's necessary medication on hand with proper instructions during any SPORTS for Exceptional Athletes program.

I hereby grant SPORTS for Exceptional Athletes, its affiliates, franchises, advertising and promotional agencies, and their agents, the irrevocable, unrestricted right to use, publish, display and distribute materials bearing the above named athlete's name, voice, likeness or any other identifiable representation of above named athlete or family members. These materials may appear in any form, style, color or medium whatsoever (including photographs, videotapes, films, sound recording, software, drawing, prints, broadcast, internet and electronic media). I agree that all material containing any identifiable representation of above named athlete shall be and remain the sole and exclusive property of SPORTS for Exceptional Athletes. I hereby release and forever discharge SPORTS for Exceptional Athletes from any and all liability and damages relating to the use of above named athlete's name, voice and any other identifiable representation of above named athlete. I have agreed to the above in consideration of the opportunity given to above named athlete by SPORTS for Exceptional Athletes to appear in these materials. I acknowledge that I have fully read and understand this document.