

PHYSICAL EDUCATION PROGRAM STUDENT REGISTRATION

P.O. Box 92 Neihart, MT 59465

Phone: (406) 236-5522. Fax: (406) 236-5523 showdownmontana.com

Date of Trip:

School:

Person in Charge of Trip:

Phone:

Instructions: (PLEASE READ!)

* List students' names **alphabetically** by last name

* Please fill in the appropriate columns for each student with an X. X= Yes. **Please leave all inapplicable columns blank.**

* List Teachers and Chaperones on a **NEW TEACHERS AND CHAPERONE REGISTRATION SHEET.**

*Email this form to peprogram@showdownmontana.com upon completion. Include a copy in the mailed envelope with the yellow cards.

* Once submitted changes need to be made by crossing students off, or adding to unused lines. Please keep do not move student's #.

*** This form and ALL rental cards MUST be received by Showdown 2 WEEK prior to the school's visit.**

#	NAME (<i>Last, First alphabetically</i>)	GRADE	SKIING	SNOW BOARD	NEED TO RENT?	1ST TIME?	AMOUNT PAID
1							
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#	NAME (Last, First alphabetically)	GRADE	SKIING	SNOW BOARD	NEED TO RENT?	1ST TIME?	AMOUNT PAID
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#	NAME (Last, First alphabetically)	GRADE	SKIING	SNOW BOARD	NEED TO RENT?	1ST TIME?	AMOUNT PAID
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#	NAME (Last, First alphabetically)	GRADE	SKIING	SNOW BOARD	NEED TO RENT?	1ST TIME?	AMOUNT PAID
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#	NAME (Last, First alphabetically)	GRADE	SKIING	SNOW BOARD	NEED TO RENT?	1ST TIME?	AMOUNT PAID
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#	NAME (Last, First alphabetically)	GRADE	SKIING	SNOW BOARD	NEED TO RENT?	1ST TIME?	AMOUNT PAID
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#	NAME (<i>Last, First alphabetically</i>)	GRADE	SKIING	SNOW BOARD	NEED TO RENT?	1ST TIME?	AMOUNT PAID
99							
100							