

2010 Season

Check out our website
spokaneparks.org



For People with
Developmental Disabilities
Ages 12 & Older

2010 Season

**Cross-Country
Skiing**
625-6245

Spokane Parks & Recreation Department
2010 Ski Season
In cooperation with Mt. Spokane Nordic Ski Area

The program began in the early 80's. We rely on volunteers from the community in order to teach Nordic skiing to people with developmental disabilities. We appreciate the volunteer ski patrol at Selkirk Lodge as well as the grooming from the state parks. We appreciate Washington Special Olympics who sponsor the Washington Chapter Winter Games in Leavenworth.

- Fresh air, exercise, meeting new friends and fun are just a few benefits of this program.
- Participants need to be twelve years of age or older and be in good physical condition.
- Class size is limited to 13. This can increase if number of volunteers increases.

Calendar

Saturdays, January 16 - February 27

Selkirk Lodge, Mt Spokane Ski Area

No class February 13th

February 14, 2010 – Langlauf

February 20, 2010 – Farragut

March 5-7 – Washington Special Olympics

The program meets at the Selkirk Lodge at the Mt. Spokane Ski Area on Saturdays, 9 AM - Noon.

Fees

- **11661 Saturdays, January 16 - February 27**
FEE: \$189.00
(includes lessons, transportation and equipment if needed)
- **11662 Saturdays, January 16 - February 27**
FEE: \$134.00
(includes lessons and equipment)
- **11663 March 5-7 Wenatchee Trip to WSO Games**
FEE: \$50.00
(includes one meal plus transportation)

Scholarships available upon request. A limited amount of scholarship money is available for individuals needing assistance. We request that individuals pay as much as they can afford so that we may assist more skiers. Call 625-6245 or email to abusch@spokanecity.org to request an application.

Transportation

The TRS Van will leave:

Park Operations, 810 N. Stone 7:30 a.m.
Yokes, Mt. Spokane Day Road 8:00 a.m.

The TRS Van return:

Yokes, Mt. Spokane Day Road 1:00 p.m.
Park Operations, 810 N. Stone 1:30 p.m.

What to Bring

Skiers need to bring a lunch, snack, and liquids (i.e. water or fruit juices) each week.

Bring skis, poles and boots. Parks equipment is available upon request.

Skiers need to have all their items clearly marked. Spokane Parks and Recreation is not responsible for lost skis and equipment.

Proper Clothing

The most important ingredient to having an enjoyable experience while skiing is being comfortable. The following list will enhance the skier's comfort:

- Socks - wool or polypropylene, not cotton or nylon (at least not worn on the outside). Special nordic socks are perfect.
- Long underwear bottoms and tops - *Polypropylene - *Capilene, REI brand, etc.
- Gloves/mittens (bring two pair in case one gets wet). Wool or polypropylene stay warm when wet; synthetics get cold when wet.
- Hats - **ABSOLUTELY MUST** always have one no matter how warm it may be - wool or polypropylene.
- Fanny packs/nap sack - great for stuffing unneeded clothes/food/liquids in.
- Ski pants - The worst possible of leg coverings is blue jeans; they soak up water and are very cold and restrictive. Rain pant or light-weight bibs will work. A pair of gaitors can also be worn.
- Vests - fleece.
- Jackets - wind resistant, breathable, nothing heavy.
- For a list of places to purchase these items, please call 625-6245 or email to abusch@spokanecity.org for a list a places to purchase items.

Volunteers are needed to ski with the participants.

Volunteer training clinics are Saturday, January 9, 2010, 9:30 a.m. - 12 p.m., at Mt. Spokane. Please call 625-6245 or email to abusch@spokanecity.org for registration form and additional information.

NEW Day Trip to Farragut

Explore new nordic area

Saturday, February 20, 2010

Meet at Park Operations, 810 N. Stone 7:30 AM

Return to Park Operations 5:30 PM

Pack a sack lunch and water. Bring \$5-10 to purchase a snack on the way home.

Langlauf Community Nordic Race Sunday, February 14, 2010 Mt. Spokane Nordic Area

Each skier must pre-register and pay for this event on their own. Forms can be found at www.spokanelanglauf.org or at Fitness Fanatics or Mt. Gear. TRS will provide supervision and transportation. Times and locations to be provided upon notification of registration for event.

Washington Special Olympics Winter Games at Wenatchee March 5-7, 2010

For skiers who are interested in competition and have met the requirements of TRS please read the following. Must have a Special Olympics Application for Participation Form on file with TRS by **January 4, 2010**. A separate TRS fee will cover transportation and one meal.

Special Olympics will cover the remaining meals, competition costs and hotel.

If you would like to make a donation to Special Olympics to help cover some of the competition and hotel costs, please send to:

Special Olympics Washington, East Region
P.O. Box 1640
Richland, WA 99352



REGISTRATION FORM

CROSS-COUNTRY SKIING FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES Spokane Parks and Recreation Department — Therapeutic Recreation Services

808 W. Spokane Falls Boulevard — Fifth Floor - City Hall, Spokane, Washington 99201-3317 625-6245

This is confidential information used only to assist the staff in meeting the participant's needs. This form must be filled out, signed, and returned with the fee to the above address before January 4, 2010.

Participant's Name: _____ E-mail : _____ Sex: M___ F___

Address: _____ City/Zip: _____

Home Phone: _____ Night Phone: _____ Emergency#: _____

Physician's Name: _____ Phone Number: _____

Medications (dosage, frequency, side effects, reason): _____

Medications taken during program? Yes___ No___ If yes, please fill out a medication waiver & information form.

Any seizures within the last year? Yes___ No___ GRAND MAL___ PETITE MAL___ OTHER___

Allergies: _____ Explain medical conditions: _____

Assistance in using the bathroom? Yes___ No___

Describe Mobility _____

Explain Communication: _____

Any other information you feel Therapeutic Recreation needs to know about participant? _____

If you are a new skier.....Do you have your own skis? Yes___ No___ Birthdate: _____ Age: _____

If no: Height: _____ Weight: _____ Shoe Size: _____ Ski Experience: _____

REGISTRATION INFORMATION

Class Number: (Circle one) **11661 \$189** **11662 \$134** **11663 \$50**

Method of payment: ___Check ___Cash ___Money Order ___Charge Card

Card Number: _____ Exp. Date: _____

Name on Card: _____

Total Program Fee: \$ _____ Donation (if any): \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____



Participation Agreement and Release of Liability

The environment that you will be in presents hazards that are different from everyday life. While it is **impossible** to eliminate all risks, you can increase your margin of safety and minimize risks by paying close attention to safety rules and procedures presented during your program. The skier must realize that there are hazards on the slopes. Falling and collisions do occur and injuries may result. Therefore, the skier assumes the burden of skiing under control at all times.

While we maintain high standards of skill and experience in our Instructors, they cannot be everywhere at once, nor are they able to guarantee your total protection from accidents or injuries. We encourage you to develop a questioning attitude and hope you will ask our instructors to explain any action, direction, or procedure with which you are unsure or uncomfortable. The major goal of our program is to provide a safe environment while learning to ski. It is up to you to make use of this material and become a safe winter skier.

Photo Release - I give my permission to have my photo taken during activities and understand that such photos may be used for publicity purposes.

I will accept the Nordic equipment for use, as is. I agree to be fully responsible for the equipment while it is in my possession and return it by the agreed date/time. I agree that I may incur additional charges if the equipment is returned late, dirty, or damaged beyond normal wear and tear. I accept my responsibility to replace, at full retail value, any Nordic equipment which I fail to return.

I, _____, AGREE TO HOLD THE CITY OF SPOKANE, THEIR AGENTS, VOLUNTEERS, AND EMPLOYEES, HARMLESS FOR ANY INJURY TO THE PARTICIPANT AND/OR DAMAGE TO THE PROPERTY OF THE PARTICIPANT, WHICH INJURY OR DAMAGE ARISES FROM PARTICIPATION IN THE WINTER SKI PROGRAM. I ACKNOWLEDGE THAT I AM (PLEASE UNDERLINE) THE PARTICIPANT PARENT _____ OR LEGAL GUARDIAN, OF _____ AND THAT I AM AUTHORIZED TO ACT ON BEHALF OF THE PARTICIPANT.

DATE: _____ SIGNATURE: _____

Return signed with completed registration form and check made out to "City of Spokane"