



Ski and Snowboard Ability Level Guide

Ski Ability Levels

Snowboard Ability Levels

Level 1

I have never skied before. I want to learn how to stop and turn.

I have never snowboarded before. I want to learn how to stop and turn.

Level 2

I can stop and sometimes turn. I want to be in control using my turns so I can go to the chairlift.

I can stop and sometimes turn on both edges. I want to be in control using my turns so I can go to the chairlift.

Level 3

I can ski in control using my turns on green runs and I'm ready for the chair lift. I want to start skiing parallel so I can explore blue runs.

I can ride in control using my turns on green runs and I'm ready for the chairlift. I want to develop my turns to explore blue runs.

Level 4

I can ski mostly parallel in control on blue runs. I want to ski full parallel to explore steeper black runs.

I can ride with flow using my turns on blue runs. I want to keep my flow in my turns when riding steeper black runs.

Level 5

I can ski full parallel on all groomed runs. I want to develop high performance skiing and explore all mountain terrain.

I can ride with flow using my turns on all groomed runs. I want to develop high performance riding and explore all mountain terrain.



Student Information

Form – (Parents to complete)

Please complete this form with accurate information. Any missing or inaccurate information may delay pick up of rental equipment and lesson starting times.

Once completed, please return to the Teacher

Student Name: _____

Student Grade: _____ Age: _____ Gender: _____

What do you require? Please tick all that apply:

- Lift ticket
- Lesson
- Rentals
- Helmet

If you require **Rentals**, all of the following information must be provided to allow the rentals to be pre-set:

Shoe Size: _____ (US Sizes) Height: _____ ft _____ inches

Weight: _____ lbs

Ski OR Snowboard

If you require **Rentals and/or Lessons**, please indicate the ski or snowboard ability level using the ability level guide:

Ski Level: _____

Snowboard Level: _____

Parents Name: _____ Signature: _____

Emergency Contact Number: _____

Any pre-existing medical conditions: _____