

STUDENT LIST

School Name _____

Att: Holly Tattrie

Email rentalshop@skiwentworth.ca

Fax:(902)548-2611

Rental Shop 548-2089 ext. 233

Alphabetical order, last name first

Teachers/Chaperones at the end.

Date _____

#	Name	Rental # or own gear	Type: Ski or Board	Weight	Height	Ability Level: N/1/2/3	DIN

Ski Technician Name _____ Sign Name _____ Date _____