

Private Lesson Registration and Liability Release

OFF	ICE USE ONLY
Date: Instructo	p
	Initials:
Method:	

Name			Age:
Parent's Names	E-mail2nd Phone2nd E-mail		
Primary Phone	2nd Phone	2nd E-ma	il
Address	City	ST	Zip
DISCIPLINE: 🗖 ALPI	NE SKIS SNOWBOARD		
	UNDS OR MAKEUPS FOR MISSED child might be riding the chair lif		
Does your child have Allergies: Y / N	any If yes, please list here:		
Medications: Y / N	If yes, please list here:		
Emergency contact: _	Phone number:		
Relation to student: _		Email:	
Hold	– Harmless, Release of Liabilit	ty and Indemnity Agree	<u>ement</u>
PLEASE READ CAREF	ULLY BEFORE SIGNING. THIS I	S A RELEASE OF LIABILI	TY AND WAIVER OF
"STUDENT" MEANS T	HE UNDERSIGNED, BEING AT I	LEAST 18 YEARS OLD, O	R THE MINOR USER
(UNDER 18) AND THE	UNDERSIGNED PARENT OR LE	GAL GUARDIAN OF TH	E MINOR SIGNING ON
BEHALF OF HIMSELF/	HERSELF AND THE MINOR (HE	REINAFTER INDIVIDUAL	LLY AND
COLLECTIVELY "I") AG	GREES AND UNDERSTANDS TH	AT ENGAGING IN:	
	Pine Creek Ski		
	Name of Ac	•	
(HEREINAETER "THE	ACTIVITY") CAN BE HAZARDOU	IS 21	

I warrant and represent that I am in good health and there are no special problems with the care of myself (or the child) and the undersigned parent or guardian (if applicable) has left no special instructions regarding myself or the child that have not been listed on the regulation form.

I recognize that there are risks including but not limited to, variations of terrain, snow conditions, moguls, rocks, forest growth, debris, marked and unmarked obstacles, water related hazards and risks near streams, risks inherent with amusement and related parks,

varying weather conditions, and activities selected by the instructor. I recognize that injuries are a common and ordinary occurrence of the Activity. I hereby agree to freely and expressly ASSUME and accept ANY AND ALL RISKS to me while participating in the Activity. Further, I voluntarily elect to participate in the Activity.

In consideration of engaging in the Activity I agree to ASSUME ALL RISKS associated with the Activity and agree to hold harmless, release, defend and indemnify Pine Creek Ski Resort and also their subsidiaries, agents, employees, representatives, assignees, directors, shareholders, trustees and officers (hereinafter "The Released Parties") from all liabilities and/or claims for injury or death to persons or damage to property arising from my engagement in the activity, including those injuries and damages caused by the The Released Parties' alleged or actual: (1) negligence or (2) breach of any express or implied warranty. By the execution of the Release, the undersigned agrees to indemnify each Release Party for any injuries to me or to other person(s) or property that I may cause as a result of engaging in the Activity.

I authorize the Released Parties and/or their authorized personnel to call for medical care for me or to transport me to a medical facility or hospital if, in the opinion of such personnel, medical attention is needed. I agree that upon my transport to any such medical facility or hospital that The Released Parties shall not have any further responsibility for me. Further, I agree to pay all costs associated with such medical care and related transportation provided for me and shall indemnify and hold harmless The Released Parties of and from any costs incurred therein.

In consideration of using the ski areas or other recreation facilities and participating in this Activity, I CONTRACTUALLY AGREE that ALL claims for injury and/or death shall be GOVERNED BY WYOMING STATUTES and EXCLUSIVE JURISDICTION shall be in the District Court residing where the alleged incident occurred or in the Federal Court for the State of Wyoming.

This Release shall be binding to the fullest extent permitted by law. If any provision of this Release is found to be unenforceable, the remaining terms shall be enforceable. The undersigned parent or legal guardian acknowledges that he/she is also signing this Release on behalf of the minor and that the minor shall be bound by all terms of this Release. This Release shall be binding upon my assignees, subrogors, distributors, heirs, next of kin, insurers, executors and personal representatives.

CONTENTS AND SIGN IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE. Executed this day of, 20				
Print Name of Student	Signature of Student			
Print Name of Parent or Guardian, if Student is less than 18 years old.	Signature of Parent or Guardian, if Student is less than 18 years old.			