

**JAYCEE LITTLE SKIER
REGISTRATION INFORMATION AND RELEASE FORM**

***Each Participant Needs a Sign-Up Sheet**

Session 1: 1/6 - 27 ____

Session 2: 2/3 - 2/24

Name: _____ Age: _____ Years of Experience: _____

Parent/Guardian Name: _____ Phone No. (____) _____

Address: _____ Phone No. (____) _____

Email Address: _____

- () **Skier**
() **Snowboarder** (Ages 9 and up only)
() **Maverick Season Pass Holder**

Equipment: Own Rent

Riding the Bus? : Yes No

Fees:

_____ \$225.00 FOUR Week Session (Mark Session Preference Above)

_____ \$60.00 **Transportation**

_____ \$60.00 Equipment Rental
(Skies/Snowboard, Boots, and Poles)

_____ Deductions (-\$45 for Maverick Season Pass holders; -\$25 for each additional family member)

_____ Total Amount for 1 participant (**\$ _____**)

Payment:

() Check # _____ Amount: \$ _____ Date: _____

() Cash Amount: \$ _____

() Card Amount: \$ _____

Please initial here _____ to allow the Dillon Jaycees to use photographs and videos of the participant's in future promotional and training content for the Dillon Jaycees Little Skier Program.

I give permission for _____ to participate in the Dillon Jaycees Little Skier Program. I understand and acknowledge that there are risks inherent in skiing/snowboarding activities and that physical injury and other harms, dangerous environmental and terrain hazards are common and ordinary dangers of the sport. I understand that such risks and dangers simply cannot be eliminated without jeopardizing the essential qualities for which I seek this/these child(ren) to participate in this event. I freely assume those risks. I understand that the Jaycees, the Dillon Jaycees Little Skier Program, its officers, directors, members, employees and agents are not liable for injury, loss or damage sustained as a result of risks inherent in skiing/snowboarding activities if those risks and dangers should be reasonably obvious, expected, or a condition that is an integral part of skiing/snowboarding activities and I assume the risk of such participation. I also acknowledge that exposure to COVID-19 is inherent in group activities and cannot be eliminated and assume the risk of possible exposure.

INTERPRETATION: This Acknowledgment of Risk shall be construed and enforced in accordance with the laws of the State of Montana. To the extent that any provision herein is inconsistent with Montana law, Montana law will control. **CAUTION: Do not sign this release agreement unless you have read and fully understand it.**

Parent or Guardians Signature

Date

Relationship