EADOWS Group Consent Form

Your	mountain pon	ne Ski	Snov	wboard Nordio	c Snowshoe
Name:			D	OB:	
Address:					
City:			State: Zip:		
Phone:		Email:			
Weight	Shoe Size	Ski		Snowboard	Ability Level
Height ft. The purchaser, holder and/or HAZAROUS and that injuries a weather conditions, variations avalanches, snow immersion, structures and their componen- expressly ASSUMES ANY AND not release or retain at all time therefore not a guarantee of sa understands that helmets are re EQUIPMENT AND THE USE O MEADOWS OREG., LIC AND DISTRIBUTORS OF THE EQUIP ARISING DIRECTLY OR INDIRE LIABILITIES ARISING FROM OF (INCLUDING COSTS AND ATT CONSENT FORM. Participant replacment, at full retail value, care while it is in the Participant misrepresentations to Meadow	are common when participating in s s and steepness in terrain, terrain fe- rocks, stumps, the use of lifts, collis nts, falling, loss of control, exceedin D ALL RISK OF INJURY, DEATH AND is nor under all circumstances when afety. Participant understands that s not designed to prevent injur y und OF ANY OTHER AREA FACILITIES, SE TS OWNERS, PARTNERS, EMPLOY 20MENT PROVIDED OR SERVICED U ECTLY OUT OF ANY USE OF THIS E RDINARY NEGLIGENCE ON THE P/ TORNEY FEES) MEADOWS, MANU accepts the equipment without any of any equipment rented from Mea nts possession. Participant agrees tw ws about height, weight, age or ski	such activities. Participant accepts ar atures and parks, snow or ice condit sions with natura I or man-made obje ng one's ability, and exceeding the li PROPERTY DAMAGE death associat e release or retention may prevent in snowboard boot/ bindings systems er all circumstances and that the use ERVICES AND PREMISES, PARTICIPA VIES, DIRECTORS, AGENTS, AFFILIA NDER THIS AGREEMENT ("MANUFA QUIPMENT AND/ OR THE AREA FAY ART OF MEADOWS AND/OR MANU FACTURERS AND DISTRIBUTORS FC y warranties, express or implied, oth adows for any loss or damage of a ny o return all equipment by the agreed ing/snowboarding ability of the Par	d assumes the ions, surface or cts or other pe mits of equipm ed with Sking jury, nor is it pc are not designe of a helmet is r NT HERE BY AG. TES AND RELA ACTURERS ANI CILITIES, SERVI JFACTURERS A R ANY CLAIM er than those m kind which rest date in clean of cicipant named	Stance Regular Left Foot Forward Goofy Right Foot Forward with Foot Forward Right Foot Forward tskiing, snow boarding and other wint risks associated with Skiing, including, rsubsurface conditions, bare spots, cre- rsons, grooming and snowmobile equ- tent to protect from injury or death. Par- . Participant understands that the ski/b participant understands that the ski/b participant understands that the ski/b sosible to predict every situation in whi- ad or intended to rele ase and are not a no guarantee of safety. IN CONSIDERAT GREES TO RELEASE, HOLD HARMLESS ITED ENTITIES ("MEADOWS"), AND AL D DISTRIBUTORS"), FROM ANY AND A CES AND PREMISES. THIS RELEASE OI ND DISTRIBUTORS. PARTICIPANT ALS BROUGHT ON BEHALF OF A MINOR I nade in this document. Participant will sults from the use of this equipment and condition, to avoid any additional charg ion this Group Consent Form and Parti ent. INJURIES may result as a conseque	, but not limited to, changing seks and gullies, forest growth, ipment, lift towers and other ticipant hereby freely and boot/binding system rented will ch it will release or retain, and it is a safety device. Participant also TION FOR USE OF THIS RENTAL 6, AND INDEMNIFY MT. HOOD LL MANUFACTURERS AND LL CLAIMS AGAINST THEM NLY INCLUDES CLAIMS AND O AGREES TO INDEMNIFY NAMED ON THIS GROUP be responsible for the d accepts full responsibility for its ges. Participant had made no cipant agrees to verify that
directed by a representative o participation in Mt. Hood Mea	f the Mt. Hood Meadows Ski Schoo adows class. I also understand that s tor. I also understand that ski schoo	OI. If I am signing on behalf of a mino ski school students of any age, in sor ol students of any age, in some cases	r, I accept full r ne cases, may l , may be asked	their ability to ski any terrain or perform esponsibility for all medical expenses in be asked to board the chair lift alone o I to board the chair lift alone or with and ardian Name	ncurred as a result of the minor's r with another person and may
			<u> </u>		

Participant	Signature
-------------	-----------

Parent/Guardian Signature

Emergency Contact (if different than parent)

MT. HOOD

Cell Phone # In Case of Emergency

I Decline. I would rather opt out of the Liability Terms at a higher price (\$20)

Printed Name of Declining Passholder

Date Initial Box

If the choice is made to decline the Release of Liability Agreement, the price of the pass will include an additional fee of \$20 per pass.