HOGADON BASIN SNOWSPORTS SCHOOL

ALPINE RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

For Daily Lessons

 Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In consideration of myself OR my child being permitted to participate in any way in the alpine ski school activities of the above Alpine Ski School, I represent that I do, on behalf of myself OR my child:

1. I acknowledge agree and represent I fully understand the nature of alpine skiing/snowboarding and alpine ski school, club activities and that I am and my child (if applies) is qualified, in good health, and in proper physical condition to participate in such Activities.
2. I fully understand that (a) Alpine skiing/snowboarding and Alpine Ski School activities involve inherent risks and dangers of serious bodily injury, including permanent disability, paralysis and/or death, (b) these risks and dangers may be caused by my own (or my child’s) actions or inactions or omission, intentional or otherwise, or the actions or inactions of others participating in the Activities and or the conditions in which the Activities take place.
3. I hereby agree for myself and for my child (if applies) to release, discharge, indemnify and covenant not to sue Hogadon Basin Snowsports School, its’ respective administrators, directors, agents, officers, volunteers, and employees, any sponsors, advertisers, and, if applicable, owners and lessors of the premises on which the Activities take place. (each considered one of the “Releasees” herein), from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the “Releasees” or otherwise.
4. I fully accept and assume all such risks and responsibility for losses, costs, and damages I incur as a result of my participation in the Activities. My signature signifies that I fully understand and agree to be bound by this Release and Waiver Agreement, for myself and for my underage child (if applicable), and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

PARTICIPANT’S SIGNATURE

(Parent’s signature & child’s name-if applicable Town/State Phone