



SUNDAY RIVER SEASONAL PROGRAM REGISTRATION 2019/2020

MAIL FORM TO: Sunday River, PO Box 4500, Newry, ME 04261

PARTICIPANT INFORMATION

Participant 1 M / F Gender DOB Age Grade Ability: Blue / Green / Black ALLERGIES YES / NO

Detail ALLERGY e.g. type, epi:

Attach another page if more space is needed

GACP: Alpine / Snowboard / Freestyle / Future Stars SnowSports School: Mini Runners / River Runners / Junior Professional / 8 Peaks

Participant 2 M / F Gender DOB Age Grade Ability: Blue / Green / Black ALLERGIES YES / NO

Detail ALLERGY e.g. type, epi:

Attach another page if more space is needed

GACP: Alpine / Snowboard / Freestyle / Future Stars SnowSports School: Mini Runners / River Runners / Junior Professional / 8 Peaks

Participant 3 M / F Gender DOB Age Grade Ability: Blue / Green / Black ALLERGIES YES / NO

Detail ALLERGY e.g. type, epi:

Attach another page if more space is needed

GACP: Alpine / Snowboard / Freestyle / Future Stars SnowSports School: Mini Runners / River Runners / Junior Professional / 8 Peaks

PARENT/GUARDIAN INFORMATION

Parent 1 Parent 2

Mailing Address

City State Zip

Home Phone Cell Phone 1 Cell Phone 2

E-mail 1 E-Mail 2

Please share my contact information with other GACP/River Runner families: YES NO

PAYMENT INFORMATION

Table with 3 columns: Category, Thru 10/08/19, After 10/08/19. Rows include GACP: AP/FS/SB/Future Stars, Mini Runners, River Runners, Junior Professionals, 8 Peaks.

*Program prices do not include the cost of Season Pass or equipment

Credit Card (VISA, MC, DISC, AMEX) Prepaid on-line Cash Check (Payable to Sunday River)

Card # Exp CCV# TOTAL

Boyer Rewards #

PLEASE READ AND SIGN NEXT PAGE

Sunday River/GACP 2019/20 Consent to participate and release of liability waiver
WARNING: ACKNOWLEDGMENT AND ASSUMPTION OF RISK

I acknowledge that skiing, riding, other snow sports and the use of passenger tramways associated therewith, in conjunction with the Sunday River Seasonal Program 2019/2020 (the "Activity") involve risks hazardous to skiers and riders regardless of all feasible safety measures that may be taken. I understand my participation in the Activity may be hazardous and involves inherent risks of skiing encompassing dangers and conditions that are an integral part of the sport, as well as other known and unknown risks which include, but are not limited to, changing weather and surface conditions, falls resulting from man-made and natural objects, design and condition of natural and man-made elements, severe terrain changes and collisions with other participants, spectators, vehicles and natural and manmade objects. I acknowledge that while participating in the Activity at times I may be a competitor practicing for, training and engaged in competition. I acknowledge that I have been advised to visually inspect the course, venue or area where the practice, training or competition is to occur. I accept all risk of course, venue or area conditions including, but not limited to weather and snow conditions; obstacles; course or feature location, construction and layout; freestyle terrain configuration and condition; collision with other competitors; and other courses, layouts and configurations of the area to be used, and any other condition which a visual inspection should reveal.

RELEASE, INDEMNITY AND HOLD HARMLESS AGREEMENT

In consideration for being allowed to participate in the Sunday River Seasonal Program, I agree on behalf of myself, my child, my heirs and for anyone on my or my child's behalf, to the fullest extent allowed by law, to RELEASE, INDEMNIFY AND HOLD HARMLESS Sunday River Skiway Corp. and Boyne USA, Inc., their owners, directors, officers, real and personal property owners, shareholders, employees, volunteers, agents, representatives, affiliates, successors and assigns (hereinafter collectively referred to as "Releasees") from any and all responsibility or legal liability for any property damage, personal injury, damage or death which may result directly or indirectly from participation in the Activity, whether or not such injury or damage was foreseeable, or any other cause or claim arising from participation in the Activity under any legal theory, including **NEGLIGENCE**.

PROMISE NOT TO SUE

I promise to not sue, and to indemnify, hold harmless and defend Releasees for any claim of injury, damage or death which may result from participating in the Activity, including any claims based on alleged **NEGLIGENCE** of Releasees. Should any claim or action be asserted in contravention to this agreement, I or my successor shall be liable for all expenses, including legal fees incurred by Releasees. I agree that if a claim or action is brought, it shall be submitted to the jurisdiction of the State or Federal Court in the State of Maine, and no other jurisdiction, and shall be governed by the laws of the State of Maine.

PHOTOGRAPHY & VIDEO RELEASE

I hereby authorize and give full consent to Releasees to copyright or publish all photographs and video in which I or my child appear while enrolled as a participant in the Activity. I further agree that this/these photograph(s) and/or video(s) may be used for any and all exhibitions, public displays, publications, commercials, art and advertising purposes, without limitation or reservations.

PARENT/GUARDIAN CONSENT AND INDEMNIFICATION AGREEMENT

As a parent/guardian with legal responsibility for the minor participating in the Activity, on behalf of whom this agreement is entered, I verify that I have the authority to enter into this agreement on behalf of the minor participant. I have read, understood and agree that, as parent/guardian, I am bound by this Agreement with respect to any claim that I, the minor participant or anyone on behalf of the minor participant may have against Releasees. Furthermore, if a claim or action is brought in contravention of this agreement, including any claim alleging **NEGLIGENCE**, I agree to RELEASE, INDEMNIFY, HOLD HARMLESS and defend Releasees for any and all expenses incurred, including legal fees, and any damages for which they may be adjudged legally liable to pay.

Consent: I hereby grant permission, in the case of injury, to have a physician or other medical personnel, provide necessary medical assistance to me. In the event that the participant is under 18 years of age as a parent/guardian of my minor child participating in the activity, I hereby grant permission, in the case of injury, to have a physician or other medical personnel, provide necessary medical assistance and/or treatment to my child.

If participant is over 18 years of age or will reach 18 years of age before or during the 2019/2020 ski season:

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Print Name	DOB	Signature	Date

If participant is under 18 years of age:

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Print Minor's Name	DOB	Parent / Guardian Signature	Date
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Print Minor's Name	DOB	Parent / Guardian Signature	Date
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Print Minor's Name	DOB	Parent / Guardian Signature	Date