

FWSA ANNUAL SKI WEEK REGISTRATION FORM

BANFF, CANADA, February 3—February 10, 2018

Please print clearly: *The information you provide is for the exclusive use of FWSA & will not be sold for solicitation.*

PRINT NAME: _____ Nickname _____

Street Address: _____ City: _____

State: _____ Zip Code: _____ PHONE: Home: (____) _____ Cell / Work: (____) _____

E-Mail Address: _____ Ski Club: _____ FWSA Council: San Diego

Date of Birth (M/D/Y): ____/____/19____ Male ____ Female ____ I am a Skier / Snowboarder / Non-Skier

If you are booking your own or will not need airfare, let me know by September 1st: _____

Lodging Preference: _____ Roommate Preference: _____

Condo-mate Preference: _____

REQUIRED EMERGENCY CONTACT INFORMATION—Person not at ski week

Name: _____ Contact Number: _____

OTHER INFORMATION--OPTIONAL

Spouse/Significant Other at Ski Week? Name: _____ Cell #: _____

List Food Allergies and/or drug allergies (optional): _____

Medical Conditions (optional): _____

List Over-the-Counter/prescription drugs taken regularly (optional): _____

- I have been advised that the FWSA trip package does not include travel insurance and I have the option to purchase my own Travel Insurance.
- I am aware that I am financially responsible for myself whether or not I purchase Travel Insurance.
- I am aware it is my responsibility to obtain all legal documents required for travel including passports and that my passport must be valid at least 6 months after trip.
- I have received a copy of the FWSA Conduct Policy.
- I further certify that I'm a current FWSA Club or Direct member and that the information I have provided on this form is accurate.
- I am aware that FWSA may use pictures taken at Ski Week in the ski week presentation, on their website, and in any promo DVD's to market other FWSA trips. I have the option to sign a form to deny the use of my photo.

X (Required) _____

Ski Week Participant Signature OR Parent/Legal Guardian for Minor

_____ Date

Complete the Information below if you Plan to Race at Ski Week (including Council Challenge)

Age Group: Junior (0-17 Years Old) _____ Open (18--49) _____ Vet (50--64) _____ SVet (65 & up) _____

Legends Classes (No Skill Levels): (75 & up) 1st grp on 2nd course _____ 1st grp on 3rd course _____

Skier Race Class: SO ___ S1 ___ S2 ___ S3 ___ S4 ___ S5 ___ S6 ___ S7 ___ S8 ___ S9 ___ S10 ___

Snowboard Upper _____ Snowboard Lower _____ Strikes? Yes No

Club I will race for: _____

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SPORT PARTICIPANT RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS ASSUMPTION OF RISK AND INDEMNITY AGREEMENT.

Please read and be certain you understand the implications of signing.

Express Assumption of Risk Associated with Sport, Venue Use and Related Activities.

I, _____ do hereby affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with all activities of FWSA Annual Ski Week including but not limited to alpine skiing, snowboarding, tubing, and tobogganing, certain additional risks, dangers and hazards including, but not limited to boarding, riding, and disembarking ski lifts, transportation of equipment related to the activities, and traveling to and from activity sites in which I am about to engage. **Inherent hazards and risks include but are not limited to:**

1. Risk of injury from the activity and equipment utilized is significant including the potential for broken bones, severe injuries to the head, neck, and back or other bodily injuries that my result in permanent disability and death.
2. Possible equipment failure and/or malfunction or misuse of my own or others' equipment.
3. **I AGREE THAT I WILL WEAR APPROVED PROTECTIVE GEAR AS DECREED BY THE GOVERNING BODY OF THE SPORT I AM PARTICIPATING IN.** However, protective gear cannot guarantee the participant's safety. I further agree that no helmet can protect the wearer against all potential head injuries or prevent injury to the wearer's face, neck or spinal cord.
4. Variation and/or steepness of terrain, variation or changes in surfaces including but not limited to snow surfaces, ice, bare spots, rocks, stumps, debris, cliffs, trees, fences, posts, trees, light poles, signs, buildings, roads, walkways, ramps, rails, stairs, pyramids, manual pads, bowls, half-pipes, jumps, padded and non-padded barriers, other persons, and other natural and man-made hazards.
5. My own negligence and/or the negligence of others, including but not limited to operator error and guide decision making including misjudging terrain, weather, riding surfaces or other obstacles.
6. Exposure to the elements and temperature extremes may result if frost nip, frost bite, heat exhaustion, heat stroke, sunburn, hypothermia and dehydration.
7. Dangers associated with exposure to natural elements include but are not limited to avalanche, rock fall, inclement weather, thunder and lightning, severe and or varied wind, temperature and other weather conditions.
8. Accidents or illness occurring in remote places where there are no available medical facilities.
9. Fatigue, exhaustion, chill, and/or dizziness, which may diminish my/our reaction time and increase the risk of accident.
10. Impact or collision with other athletes, spectators, facility employees, pedestrians, motor vehicles, and cyclists.

***I understand the description of these risks is not complete and unknown or unanticipated risks may result in injury, illness, or death.**

WARNING

I am aware and acknowledge that racing and training and practice for racing have inherent dangers and risks for any competitor. Race courses may be icy, rutted, and bumpy. I assume the risk of all course conditions including, but not limited to weather and snow conditions, course construction or layout, and obstacles. I am required to inspect physically and visually the course and area of competition prior to the beginning of competition and, by using the course, assume the risk of all course conditions. I am voluntarily participating in these races and training and practice for the race with the full knowledge of the dangers and risks involved and hereby agree to accept any and all risks or injury, or death that my result.

Release of Liability, Waiver of Claims and Indemnity Agreement

In consideration for being permitted to participate in the above described activity(ies) and related activities, I hereby agree, acknowledge and appreciate that:

1. **I HEREBY RELEASE AND HOLD HARMLESS WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY NEGLIGENCE OR OTHERWISE,** the following named persons or entities, herein referred to as releasees: **Far West Ski Association (FWSA) and their directors and officers, FWSA Ski Councils and their directors and officers, FWSA Ski Clubs and their directors and officers, Far West Race Association (FWRA) and their directors and officers, and their successors and assigns.**
2. To release the releasees, their officers, directors, employees, representatives, agents, and volunteers from liability and responsibility whatsoever and for any claims or causes of action that I, my estate, heirs, survivors, executors, or assigns may have for personal injury, property damage, or wrongful death arising from the above activities whether caused by active or passive negligence of the releasees or otherwise. By executing this document, I agree to hold the releasees harmless and indemnify them in conjunction with any injury, disability, death, or loss or damage to person or property that may occur as a result of my engaging in the above activities.
3. By entering into this Agreement, I am not relying on any oral or written representation or statements made by the releasees, other than what is set forth in this Agreement.
4. This agreement shall apply to any and all injury, disability, death, or loss or damage to person or property occurring at any time after the execution of this agreement.

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.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND THAT I HAVE GIVEN UP LEGAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

S/ _____

Signature of Adult Participant

Name of Adult Participant (Please Print)

Date

FOR PARTICIPANTS OF MINORITY AGE: *This is to certify that I, as Parent, Guardian, Temporary Guardian with legal responsibility for this participant, do consent and agree not only to his/her release of all Releasees, but also to release and indemnify the Releasees from any and all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns, and next of kin.*

S/ _____

Signature of Parent or Adult Legal Guardian if Participant is a Minor

Name of Parent or Adult Legal Guardian (Print Clearly)

Date

(Print Name of Minor Child)