



mt. Holiday
Ski & Recreation Area

WINTER WONDER FEST

“Big Air”

Saturday 2/14/10 – 10:00am

Registration & Release Form

All participants must read & sign attached release

All participants under the age of 18 must have legal guardian signature

Helmets are mandatory

Participant Name _____

Gender - male _____ female _____

Date of Birth _____

Address _____

Phone #'s (H) _____ (B) _____

Cell phone _____

E-mail _____

I have read & understand the release at the bottom of this form:

Please print name here _____

Signature _____ date _____

Guardian signature _____ date _____

Please submit completed registrations to....

Email: mtholidayguestservices@charterinternet.com

Drop Off: 3100 Holiday Rd, Traverse City, MI 49686

Fax: 231-938-2508 Attn. Guest Services



mt. Holiday
Ski & Recreation Area

EVENT PARTICIPANT
ACKNOWLEDGEMENT, CONSENT, AND RELEASE

REGISTRANT'S NAME: _____

REGISTRANT'S ADDRESS: _____

REGISTRANT'S PARENT OR GUARDIAN NAME: _____

IF REGISTRANT UNDER THE AGE OF 18, REGISTRANT'S PARENT'S OR GUARDIAN'S ADDRESS: _____

1. The Registrant above named enrolls in: WINTER WONDERFEST – BIG AIR at Mt. Holiday hereinafter referred to as owner, subject to the rules and regulations determined by the owner and its agents.
2. The Registrant acknowledges the inherent risks and dangers and my responsibility to satisfy myself as to the conditions surrounding the ski program and in consideration of and as a condition precedent to my participation in this program, I hereby unconditionally release the Mt. Holiday, Inc. and its personnel, and any person connected with or involved in producing this program, from all liability and hereby waive any claims that I may now have or which may arise as a result of my participation in this program.
3. The Registrant covenants not to sue and releases the owner, and any other sponsors or agents, from any liability arising out of personal injury wherein the personal injury was the result of an activity conducted as part of the usual activity of the owner. The owner assumes no responsibility for activities undertaken by the Registrant without proper supervision and guidance.
4. The Registrant agrees that in the event of a claim being made against the owner for personal injury that notice of said claim is made to the owner by Registered mail within 90 days of said personal injury. Failure on the part of the Registrant to deliver said notice shall constitute a waiver of the Registrant's right to sue under the laws of the State of Michigan or any other jurisdiction.
5. The Registrant acknowledges that the provisions of this Acknowledgement, Consent, and Release shall be binding upon the Registrant, his heirs, executors, administrators and assigns, and shall be governed by the laws of the State of Michigan. The Registrant agrees that any suit or legal action shall be brought only in the State of Michigan and that the terms of this document shall be admissible in evidence as a binding legal agreement between the Registrant and the owner. The Registrant acknowledges that if a Court determines that part of this document is inadmissible that the remaining paragraphs shall remain in full force and effect.

WITNESS: _____
REGISTRANT

DATE: _____
REGISTRANT'S LEGAL PARENT OR GUARDIAN

WITNESS: _____