### Auburn Junior High SKI CLUB

### **Labrador Mountain**

Student Name	Cell phone number:	
Students address:		
Parent/Guardian(s) 1	Cell	
Parent/Guardian(s) 2	Cell	
Address:		· · · · · · · · · · · · · · · · · · ·
Parent/Guardian; email address:		
Total from Group Pass Application:		\$
Coach Bus Travel - \$140.00 (6 ROUND TRIP rides):		\$
Total Amount Enclosed by check to Auburn Junior	· High School Ski Club:	TOTAL: \$

The total amount is due on or before October 21st 20221. No Partial Payment can be accepted.

Discounted rates are open to all family members and community. Bussing is available only to AJHS students.



### **AUBURN JUNIOR HIGH SKI CLUB**

WHEN: FRIDAY Dates: January 5, 12, 20 & 27 February 3 & 10

Checklist:

WHERE: Labrador Mountain Ski Club on Friday nights. Your FRIDAY pass is good for the whole season. The pass also includes four/one-hour lessons that must be used on ski club nights.

**HOW:** The bus will load and leave at approx. **2:45pm.** If a Ski Club Member is running a few minutes late please txt/call Mr. Gorney (315) 277-0915; bus <u>will not</u> wait past <u>3:00 p.m.</u> We will be returning to the Cayuga Community College Parking lot at approx. <u>8:45 -9:00 p.m.</u> We will ask your children to contact you when we get to Skaneateles so that you have adequate notice.

WHAT: The required forms must be completed along with a check for the amount owed made out to Auburn Ski Club. Paperwork and full payment will need to be handed in on or before <u>October 27th in the AJHS Main Office</u>. There are no refunds. If school is cancelled there will be no ski club!! (Nights are rescheduled when possible depending on charter bus availability.) We may cancel if there is a low wind chill or if it goes 20 degrees below zero.

1 Re	eturn page 2 with all payment and contact information completed.
2 Re	eturn page 6 AJHS Code of Conduct/Safety form, (Signature page only).
3 Re	eturn page 7 Group program Pass Application. Complete all sections including Lesson info.
4Re	eturn page 9 SKICNY rental form if renting a board/skis/helmet.
5Re	eturn Page 10 Rental Helmet Liability if renting a helmet.
6Re	eturn page 11 Health Update Form.
7 Pic	cture – we will use your school picture from schooltool.
8 En	closed payment. Checks should be made out to Auburn Junior High Ski Club
Deadline -F	Return to AJHS Main Office by 10/27/23.
If you have	any questions call:
Ron Gorney	y – 315-277-0915 ( <u>ronaldgorney@aecsd.education</u> ) (Owasco)
Meg Walsh	n- 315-255-8532 (margaretwalsh@aecsd.education (AJHS)

Principal David Oliver – 315-255-8484 Song Mtn Ski Resort – 315-696-5711



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Students

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# AUBURN SCHOOL DISTRICT PARTICIPANT GUIDELINES FOR CO-CURRICULAR AND EXTRA-CLASSROOM ACTIVITIES

### Section I: Academic Eligibility Statement

The number one priority of the Auburn Enlarged City School District is to educate the whole child, first by stimulating the child intellectually and then by providing a number of common experiences designed to develop the social, emotional, physical and ethical values necessary to be a productive member of society. Co-curricular programs help to provide such experiences and are, therefore, considered an integral part of the total educational program. Involvement in co-curricular activities can have a positive influence on the academic achievement of students. However, academics must always come first to accomplish this objective an eligibility standard has been established. The guidelines are as follows:

- A. On report card distribution dates, at the high school and Jr. High levels, and at a 5-week report distribution dates at the Jr. High level, students will be determined to be eligible if they earn a 70% or higher overall average and have no grade of "Incomplete".
- B. Each time a student does not meet this standard, he or she will be put on academic probation until the next report card distribution date. Students may participate in co-curricular activities while they are on probation. It is the student's responsibility to meet with his or her teacher(s) to raise his/her overall average at least to the acceptable level of 70% and to make up the work needed to change an "Incomplete" to a grade.
- C. At the end of the six week probationary period, the student who continues to maintain an average below 70% will be declared ineligible until the marking period in which they achieve an average of 70% or better. Students declared ineligible may not participate in, or try-out for, any co-curricular activity.

  EXAMPLE: A student on probation for the first marking period who does not raise his/her overall average to a 70% or above by the end of the second marking period, will be ineligible for the third marking period. If the student raises their overall average to a 70% or above by the end of the third marking period, the student would be eligible for the fourth marking period. If the student's overall average at the end of the fourth marking period falls below a 70%, the student would return to probation for the fifth marking period.
- D. A student's probation and eligibility status as of the 6th marking period will be carried over to the first marking period. The Summer School marking period average, not including the final exam grade, will be used to recalculate the 6th marking period average for the purposes of determining first marking period eligibility in the fall.
- E. This regulation will include all students, whether they are in the manager or player role in athletics.
- F. This regulation will include all sports and co-curricular activities.
- G. An 8th grade student with an eligibility status of ineligible, or on probation, as of the 6th marking period at AJHS will enter 9th grade at AHS with an amended eligibility status of probationary in an effort to get them involved in AHS activities

### Section II: Behavioral Eligibility Statement

### A. Attendance:

- 1. Students who serve an out-of-school suspension, on the day of a co-curricular activity or other school affair (ie: dance) scheduled after regular school hours, are not eligible for participation or attendance at such events. If a student is suspended Friday, or the day before a break, s/he may not participate in any school activities until the conclusion of their Suspension, on the next day school is in regular session.
- 2. Students who serve a full day of in school suspension may not participate in co-curricular events after school. However, a coach or activity supervisor, at his or her discretion, may require a student to attend, but not to participate.
- 3. In order for students to attend a school-sponsored function, it is necessary that students attend classes for a minimum of four bells.

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Students

# <u>AUBURN SCHOOL DISTRICT</u> PARTICIPANT GUIDELINES FOR CO-CURRICULAR AND EXTRA-CLASSROOM ACTIVITIES

### Section II: Behavioral Eligibility Statement

### B. Trips during vacation and school-sponsored trips:

Trips during vacation and school-sponsored trips are deemed to be legal absences for the purpose of cocurricular eligibility only. Therefore, a student who goes on a trip during vacation or on a schoolsponsored trip will not be dropped from a team or activity. However, team or activity membership rules may determine the extent of participation when the student returns.

### C. Equipment Loss

Any loss of, or damage to, equipment or materials must be paid for by the end of the season of activity. Failure to pay by the end of that season will result in the student not participating in any future activity until payment is made.

### D. Vandalism and Stealing

Any co-curricular participant who is found guilty of stealing or vandalizing the property of another while attending or participating in a co-curricular activity or event shall be ineligible to participate in the activity and/or shall be dropped from the activity.

### E. Code-of-Conduct Rules:

- 1. Every participant is expected to fully uphold all school discipline rules including the District policy on School Conduct and Discipline.
- 2. No participant in any school-sponsored activity will be allowed to smoke, use, possess, sell, give or receive a cigarette, cigar or pipe, use chewing or smokeless tobacco or be in possession of any product including
  - e-cigarettes, vaping devices and/or products used for vaping and any other related items.
- 3. No participant in any school-sponsored activity will be allowed to drink alcoholic beverages, be under the influence of alcohol, or in possession of an alcoholic beverage.
- 4. No member of any school-sponsored activity will use, possess, sell, give or receive any drug or controlled substance, including marijuana, or any instruments for the use of such drugs, controlled substances or marijuana such as a pipe, syringe or other paraphernalia. Excepted is any drug taken in accordance with a current prescription signed by a physician that is to be taken by that particular student at the time in question.
- 5. The District will hold participants accountable for their social media posts. This will be subject to investigation. After investigation, violations of this co-curricular and extra-classroom Code of Conduct and/or the district's Code of Conduct may result in removal from sports and co-curricular activities.
- 6. The above code-of-conduct rules also extend to student conduct off school grounds, including student attendance at parties where alcohol and/or illegal drugs are present, for example.
- 7. Co-curricular participants who are found guilty of violating #2 through #5 of the above code of conduct rules will be suspended, at a minimum, from the athletic team for the remainder of the season in which the violation occurred. For activities that last the duration of a school year a student violating #2-#5 may be suspended for up to twelve weeks from that activity. Additional consequences will be considered for repeat offenders.
- 8. This regulation will include all students, whether they are in the manager or player role in athletics.
- 9. This regulation will include all sports and co-curricular activities.





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Students

### **AUBURN SCHOOL DISTRICT**

# PARTICIPANT GUIDELINES FOR CO-CURRICULAR AND CO-CURRICULAR ACTIVITIES

(Continued)

Section IV: Athletic Section:

A. Physicals:

Each athlete must have a physical examination by physician prior to participation in any sport. An exam will be completed by the school physician at no charge or may be completed by a participant's physician at his or her own expense. A completed **Health Information Sheet** (75-D) Form must be signed by a Parent/Guardian prior to a physical. No equipment will be given or practice permitted unless the student has had a physical. Any athlete who sees a physician for injury or illness must have a signed release in order to participate.

B. Unsportsmanlike Conduct:

Athletes who have been disqualified by a game official from an athletic contest due to unsportsmanlike conduct will not be permitted to participate in the next league contest. This is a Section III Rule.

C. Changing Sports:

An athlete may change sports during a season with the consent of both coaches involved and the Athletic Director.

D. Rules: All Auburn School district rules and team, membership rules are subject to NEW YORK STATE PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION SECTION III rules and all ONONDAGA HIGH SCHOOL LEAGUE rules.

The following is a statement which must be signed by all students who participate in athletics and/or co-curricular activities, as well as their parent/guardian. This statement shall have attached to it The Participant Guidelines for Co-curricular Activities.

### Section V: Medical Insurance/Risk of Injury Section:

### A. Medical Insurance:

The Auburn Enlarged City School District carries limited insurance to pay for medical expenses of students who are injured while participating in the School District's authorized and supervised interscholastic sports program. It is limited in the sense that it pays for medical expenses for only certain injuries and only in limited amounts and for certain injuries. Students and parents should also be aware that the School District's insurance is not only limited in coverage and amount, but that it is secondary to other insurances which may cover such medical expenses, including (without limitation) a family's personal medical or hospital insurances. In other words and by way of example, a family's personal insurance must first be used to its allowable limits before the School District's limited insurance would be available to pay any portion or all of the unpaid medical expenses. For further information regarding the School District's insurances, you are advised to contact the personnel office of the School District.



Activity/Sport:	Ski Club -A	2HT	2003	7420 R
Supervisor/Coach	Name: Walsh	Govrey	2005	4 of 4
Student Name: _	•		Students	
AUBURN SCHOOL	L DISTRICT			
	GUIDELINES FOR	CO-CURRICULAR	AND EXTRA-CL	ASSROOM
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Dated:	, 20			
			Student (Signature)	
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Dated:	, 20			
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Additionally, I have		al Statement Signature: etic Code of Conduct and ership Rules).	agree to support all the	ne rules and
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Dated:	, 20			

# **2023-24 GROUP PROGRAM**

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B. Sat or	Sun Seas	on Pass	& 4 WI	k Lessor	ı Pkg - \	/alid cither Satu	ırday	or Sunday for	the entire season,	9a to 5p (see n	ote 2).	49		289
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SkiCNY.com

315-696-5711 607-842-6204

### <u>WARNING TO SKIERS AND SNOWBOARDERS</u>



Downhill skiing and snowboarding, like many other sports, contains facility in New York State. New York law imposes a duty on you to beinherent risks including, but not limited to the risk of personal injury, including catastrophic injury, or death, or property damage, which may be caused by variations in terrain or weather conditions; or, surface or subsurface snow, ice, bare spots or areas of thin cover, moguls, ruts, bumps; or other persons using the facilities; or, rocks, forest growth, debris,

branches, trees, roots, stumps; or, other natural objects or manmade in skiing. If you are not willing to assume all of these risks and abide by objects that are incidental to the provision or maintenance of a ski all of these duties, you must not participate in skiing at these ski areas.

come apprised of, and understand, the risks inherent in the sport of skiing, as set forth by New York State, so that you may make an informed decision of whether to participate in skiing notwithstanding the risks. New York law also imposes additional duties upon you, to which you must adhere, for the purpose of avoiding injury caused by any of the risks inherent

### **Notes, Terms And Conditions**

- 1. Group Program Rates apply only when purchased through a Song Mountain or Labrador Mountain authorized Group Program Advisor. All individual payments must be made to your Group's Advisor, per their instructions. All group payments must be made in total by the Group Program Advisor on or before November 15, 2023. There is a 15% surcharge for any payments made after November 15, 2023.
- 2. 1-Day-Per-Week Group Program Passes are good on their respective day at their respective mountain. They are not interchangeable between Song and Labrador. Group Program Advisors may request to move their group to the alternate Mountain on a limited, space available basis.
- 3. Unrestricted 'Full Season Passes' are good any time, any day at both Song and Labrador. NO LESSONS ARE **INCLUDED.** To add the 4 week lesson program add \$175 EACH (see note 7).
- 4. Lessons (ages 8 & up) run for four consecutive weeks on your chosen day of the week starting January 2, 2024. No "make-ups" will be given for missed lessons.
- 5. A per diem group rental rate is NOT available until the completion of the 6 week program and upon presentation of an expired "Group Rental 6 Pac". A \$6 rental 'Dam-

- age Waiver'is included and insures against any damages to rental equipment. It does NOT cover loss or theft!
- 6. The 6 week "Meal Plan" is available for grades 3-12. It includes choice of chicken nuggets, cheeseburger, hamburger, slice of pizza, mozzarella sticks, hot dog, or prepackaged sandwich, AND french fries, AND choice of small fountain drink, or milk. Non-transferable, no cash value, no substitutions, no credit for missed weeks.
- 7. Full Season Passes do not include lessons. To participate in the 4 week lesson program (ages 8 & up) when purchasing a Full Season Pass, add \$175 EACH.
- 8. Lockers are sold on a 1st come, 1st served basis. Varying widths are available but all are 72" tall. 12" wide = 171.72, 15" wide = 193.32, 18" wide = 225.72, tax included. For skis longer than 190 cm, add \$54 for a slope topped locker.
- 9. A contribution to the "Ski Patrol Endowment Fund" is 100% VOLUNTARY. Any amount will be accepted but \$10 for individuals and \$20 for families is suggested. All funds collected go to update Ski Patrol equipment enhancing their ability to serve the skiing and snowboarding public. Song Mountain or Labrador Mountain do not retain any of these contributions.

Season passes must be worn above the waist so that they remain easily visible at all times. The operation of Song & Labrador Mountains are at the sole discretion of management and may be dictated by weather, snow conditions, safety concerns, and many other uncontrollable variables. Lost or stolen passes should be reported immediately. There is a \$25 charge for replacement of lost or stolen passes. Do not forget your pass! Day lift tickets will be issued in lieu of forgotten passes as follows: first time = \$5, 2nd time = \$25, 3rd time or more = full ticket price. Passes remain the property of Song & Labrador Mountains and are strictly nontransferable. Passes will be revoked without refund if transferred or otherwise misused.

### NO REFUNDS for season passes will be issued FOR ANY \*REASON.

# OFFICE USE ONLY

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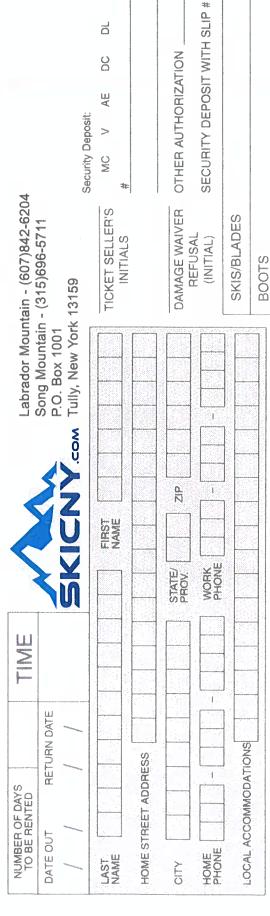
SkiCNY.com TULLY, NY



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SNOW BOARD STANCE

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RELEASE RETENTION SETTINGS

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BOOT SIZE

SKIER TYPE

# RENTAL AGREEMENT AND RELEASE OF LIABILITY PLEASE READ CAREFULLY BEFORE SIGNING

agree to pay intermountain Management, Inc., herein after known as "The Mountain" for any loss or damage, other than reasonable wear resulting from use. I have made no misrepresentations to this ski shop regarding this user's height. l accept for use the equipment listed on this form and accept full responsibility for the care of this equipment and weight, age or skier type.

Eunderstand and am aware that skiing is a HAZARDOUS activity. Eunderstand that the sport of skiing and the use of this ski equipment involve a risk of injury to any and all parts of this user's body. I am voluntarily participating in these activities with knowledge of the danger involved. I hereby agree to freely and expressly assume and accept any and all risks of injury to the user of this equipment and to any other person while skiing I AGREE TO RELEASE "The Mountain", its employees, owners, affiliates, agents, officers, directors, and the manufacturers and distributors of this equipment (collectively "PROVIDERS"), from all liability for injury, death, property loss and damage which results from the equipment user's participation in the sport of skiing/snowboarding, or is in any way related to use of this equipment, including all liability which results from the NEGLIGENCE of PROVIDERS or any other person or cause. Lagree NOT to make a claim against or sue "The Mountain" for injuries or damages relating to skiing/snowboarding and/or the use of this equipmen

I further agree to defend and indemnify PROVIDERS for any loss or damage, including any that results from claims or lawsuits for personal injury, death and property loss and damage related in any way to the use of this

The applicable law of New York State governs this agreement. If any provision of this agreement is determined to be unenforceable, all other provisions shall be given full force and effect. I have carefully read this agreement and release of liability and fully understand its contents. I hereby agree to this ski equipment is accepted "as is". I am aware that this is a release of liability and a contract between accept the terms and conditions of this contract. This document constitutes the final and entire agreement between The Mountain" and the undersigned. "The Mountain", itself, provides NO WARRANTIES, express or implied, and "The Mountain" and myself and I sign it of my own free will.

FOR SNOWBOARDERS - Lagree that I have been instructed in the proper use of the equipment listed on this form and that I understand how the bindings work. I understand that the Board-Boot-Binding will not release during use, nor is it specifically designed to release as the result of forces induced during operation, and there is absolutely no guarantee of my safety.

FOR SKIERS - I understand that the ski equipment being furnished forms a part of or all of a ski-boot-binding system which will NOT RELEASE at all times or under all circumstances, and that it is not possible to predict eyery situation in which it will or will not release, and that its use cannot guarantee this user's safety or freedom from injury while skiing, I further agree and understand that this ski-boot-binding system may reduce but does NOT ELIMINATE THE RISK of injuries to the lower portion of this user's leg. However, I agree and understand that this ski-bootbinding system may NOT reduce the risk of injuries to this user's knees or any other parts of this user's body.

Lagree that I have been instructed in the proper use of the equipment listed on this form and that I understand how the bindings work. Lagree that the binding release settings recorded on this form are the same as the settings appearing in the visual indicator windows on the binding and that those settings are the same as the settings shown in the manufacturer's written recommendation. I will not ski if any parts are worn, damaged, or missing.

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User's Signature:		

Parent/Guardian: If equipment user is a minor. I verify that I am the parent or guardian of the minor, and I have authority to enter into this agreement on behalf of the equipment user and I agree to be bound by the terms and conditions of this agreement.

Date Parent/Guardian's Signature:

# RENTAL HELMET WARNING AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY GREEMENT

Please read carefully before signing. You are waiving certain legal rights.

Signature of Renter

PLACE RENTAL VOUCHER HERE

The undersigned, being at least 18 years old, or if younger than 18 years of age is accompanied by a parent or guardian who has read and signed the following release (herein referred to collectively as "I") agree as follows:

1.	I understand and agree that skiing, snowboarding and related activities are HAZARDOUS and that injuries are common and ordinary occurrences during these activities. I AGREE TO ASSUME ALL RISKS of death or injury to any part of the user's body while using this equipment, including any which may result from the use of the helmet.
•	(Initial) (Parent or Guardian Initial)
2.	I understand and agree that no helmet can protect the wearer against all foreseeable impacts to the head, and that skiing and
	snowboarding can expose the user to forces, which exceed the limits of protection offered by this helmet. I understand that this helmet does not guard against injury to the neck, spine or any other part of my body, and that these limitations are
	INHERENT RISKS of any activity in which this helmet will be used.
3.	TO THE FULLEST EXTENT ALLOWED BY LAW, I hereby agree to forever RELEASE AND HOLD HARMLESS
٥.	Song Mountain Resort, its employees, owners, affiliates, agents, officers, directors, and the manufacturers and distributors
	of the helmet and its components, from ANY AND ALL RESPONSIBILITY OR LEGAL LIABILITY for any injuries,
	damages or death to any user of this helmet, whether resulting from NEGLIGENCE or any other cause. I further agree that
	I WILL DEFEND AND INDEMNIFY them if any claim or action is pursued for any injuries, damages or death relating to
	skiing, snowboarding or any related activities involving the use of this equipment.
	(Initial) (Parent or Guardian Initial)
4.	This helmet must fit properly in order to maximize its performance, and I agree that the provider has properly fit this hel-
	met to me. All instruction on the use of the helmet has been made clear to me and I understand the function of my helmet.
	I warrant that the helmet is comfortably snug and that when I fasten the chinstrap and shake my head there is no significant
5	movement of the helmet. I further warrant that I will be the only person using the helmet during this rental or demo period.
5.	If the helmet is damaged or involved in any kind of accident, I will immediately return it to the shop and report the accident or damage to the shop in writing. (I will be responsible for the replacement at full retail value of the helmet if it is not
	returned to the shop. I acknowledge by obligation to return this helmet by the agreed date in clean condition and agree to
	pay for any repairs in the event that helmet is damaged beyond normal wear and tear.)
6.	This document is a legally binding contract that supercedes any other agreements or representations by or between the
	parties. I agree that the laws of the State of New York shall govern this binding agreement.
7.	If this equipment is used by someone other than me, I certify that I am acting as agent for the user and that I will provide
	this form and all pertinent warnings and information to the user. This agreement shall be binding upon my assignees, subrogates, distributes, heirs, next-to-kin, executors, personal representatives, and administrators and may be pled as a com-
8.	plete bar and defense against any claim, demand, action or causes of action by or on behalf of the undersigned or any user. If the equipment user is a minor, I verify that I am the parent or guardian of the minor and I have authority to enter into this
0.	agreement on behalf of the equipment user, and I agree to be bound by the terms and conditions of this agreement on
	behalf of the equipment user, and I agree to be bound by the terms and conditions of this agreement and to defend and
	indemnify all renters, manufacturers and distributors of this helmet in any claim or suit arising from said minor's use of
	this equipment.
	I/WE HAVE CAREFULLY READ THE FOREGOING WARNING, LIABILITY RELEASE, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT. I/WE UNDERSTAND ITS
	CONTENTS AND SIGN IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.
Exec	cuted this day of, 20
Nom	e of Renter (print)  Parent or Guardian if Applicable (print)
Ivail	e of Renter (print) Parent or Guardian if Applicable (print)

Signature Parent or Guardian



# **HEALTH UPDATE** (Every 50 days – update may be required) Please complete the following information and return to your student's teacher.

Student's Last Name					AJTI	<u> </u>		
Address			First Na		Grade			
			Phone			Birth Date		
In case of accident or illr	ness, it is mai	ndatory that you pr	ovide the follow	ing inf	ormation for e	nergency calls:		
Name Las		First	Address		Phone/Cell#		Work Phone	
Mother								
Father			-					
Stepparent								
Guardian								
Name	Relationsl	hip Ad	dress	<u> </u>	Phone	Work Name	Work Phone	
in case I cannot be reached, I a	aumorize the At	iburn School District to	render such treatm	nent as m	ay be necessary in	an emergency for th	ne health of my	
child. I give my permission to other physician if my own is n This form will be utilized for t and Health Services. It will al	the school office to available, to the current schools to be available	cial in charge to obtain provide immediate and ol year. The informatio on field trips and in the	the services of the necessary care. on will be shared with event of an emerge	nearest and the second in the	mbulance, rescue priate instructiona be given to emerg	service, family phys I staff, the transporta gency personnel.	ician on record, or	
child. I give my permission to other physician if my own is n This form will be utilized for t and Health Services. It will al	the school office to available, to the current schools to be available	cial in charge to obtain provide immediate and ol year. The informatio on field trips and in the	the services of the necessary care. on will be shared with event of an emerge	nearest and the second in the	mbulance, rescue priate instructiona be given to emerg	service, family phys I staff, the transporta gency personnel.	ician on record, or	
child. I give my permission to other physician if my own is n This form will be utilized for t and Health Services. It will al  Date  Does Child Have:	the school office to available, to the current schools to be available	cial in charge to obtain provide immediate and ol year. The information field trips and in the ture of Parent/Guar	the services of the necessary care.  on will be shared with event of an emerge ordinan X  Yes	nearest and the second in the	mbulance, rescue priate instructiona be given to emerg	service, family phys I staff, the transporta gency personnel.	ician on record, or	
child. I give my permission to other physician if my own is n  This form will be utilized for t and Health Services. It will al  Date  Does Child Have:  Allergies (Food, Bee,	the school office of available, to the current schools be available  Signa	cial in charge to obtain provide immediate and ol year. The informatio on field trips and in the ture of Parent/Guar Seizure Disorder	the services of the necessary care.  on will be shared with event of an emerge ordinan X  Yes	nearest a	mbulance, rescue priate instructiona be given to emerg	service, family phys  I staff, the transportatency personnel.	ician on record, or	
child. I give my permission to other physician if my own is n  This form will be utilized for t and Health Services. It will al  Date  Does Child Have:  Allergies (Food, Bee, Medication)	the school office of available, to the current schools be available  Signa	cial in charge to obtain provide immediate and ol year. The informatio on field trips and in the ture of Parent/Guar Seizure Disorder Diabetes	the services of the necessary care.  on will be shared with event of an emerger of the necessary care.  Yes	nearest a	priate instructiona be given to emerg  Asthma Hearing Diso	service, family phys  I staff, the transportation personnel.  Yes  rder	ician on record, or	
child. I give my permission to other physician if my own is n  This form will be utilized for t and Health Services. It will al  Date  Does Child Have: Allergies (Food, Bee, Medication)  Attention Deficit	the school office of available, to the current schools be available  Signa	cial in charge to obtain provide immediate and ol year. The informatio on field trips and in the ture of Parent/Guar Seizure Disorder Diabetes Bladder/Bowel P	the services of the necessary care.  on will be shared with event of an emerge redian X	nearest a	priate instructiona be given to emerg  Asthma Hearing Disor	service, family phys  I staff, the transportation the staff, the transportation to the staff, the s	ician on record, or	
Allergies (Food, Bee, Medication) Attention Deficit (ADD, ADHD)	the school office of available, to the current schools be available  Signa	cial in charge to obtain provide immediate and ol year. The information field trips and in the ture of Parent/Guar Seizure Disorder Diabetes Bladder/Bowel P Skin rash/eczema	the services of the necessary care.  on will be shared with event of an emerge redian X  Yes  Troblem	nearest a	priate instructiona be given to emerg  Asthma Hearing Disor Vision Disor Glasses/conta	service, family phys  I staff, the transportation the staff, the transportation to the staff, the staff, the transportation to the staff, the s	ician on record, or	
child. I give my permission to other physician if my own is n  This form will be utilized for t and Health Services. It will al  Date  Does Child Have: Allergies (Food, Bee, Medication)  Attention Deficit (ADD, ADHD)  Medication*	the school office of available, to the current schools be available  Signa	cial in charge to obtain provide immediate and ol year. The information field trips and in the ture of Parent/Guar Seizure Disorder Diabetes Bladder/Bowel P Skin rash/eczema Headaches/Head	the services of the necessary care.  on will be shared with event of an emerge redian X  Yes  Troblem	nearest a	priate instructiona be given to emerg  Asthma Hearing Diso Vision Disoro Glasses/conta Heart Murmu	service, family phys  I staff, the transportatency personnel.  Yes  rder ler cts r	ician on record, or	
child. I give my permission to other physician if my own is not the physician if my own is no	the school office of available, to the current schools be available  Signa	cial in charge to obtain provide immediate and ol year. The information field trips and in the ture of Parent/Guar Seizure Disorder Diabetes Bladder/Bowel P Skin rash/eczema	the services of the necessary care.  on will be shared with event of an emerge redian X  Yes  Troblem	nearest a	Asthma Hearing Disor Glasses/conta Heart Murmu Other (chicke	service, family phys  I staff, the transportate staff, the transportation staff, t	ician on record, or	
child. I give my permission to other physician if my own is n  This form will be utilized for t and Health Services. It will al  Date  Does Child Have: Allergies (Food, Bee, Medication)  Attention Deficit	the school office of available, to the current schools be available  Signa	cial in charge to obtain provide immediate and ol year. The information field trips and in the ture of Parent/Guar Seizure Disorder Diabetes Bladder/Bowel P Skin rash/eczema Headaches/Head Ear Infections	the services of the necessary care.  on will be shared with event of an emerge redian X  Yes  Problem Injury	nearest a	priate instructiona be given to emerg  Asthma Hearing Diso Vision Disoro Glasses/conta Heart Murmu	service, family phys  I staff, the transportate staff, the transportation staff, t	ician on record, or	
child. I give my permission to other physician if my own is not the physician if my own is no	the school office the current school so be available  Signal  Yes No	cial in charge to obtain provide immediate and ol year. The information field trips and in the ture of Parent/Guar Seizure Disorder Diabetes Bladder/Bowel P Skin rash/eczema Headaches/Head Ear Infections Tubes in ears Loss of Conscious	the services of the inecessary care.  On will be shared with event of an emerge of the inecessary care.  Yes  Troblem Injury Injury Inspects	ith appropency will	Asthma Hearing Disor Glasses/conta Heart Murmu Other (chicke mononucleo	yes rder ler cts r n pox sis, etc)	No No No	









# **Parent & Youth School Group Program Pricing**

(Grades 3-12) Elementary, Middle, and High School Programs Include:

PROGRAM	STUDENT FEE	PARENT FEE
Monday-Friday Season Pass/4 week Lesson Pkg (Valid entire season the	\$149	\$189
same day of the week, 10am to close/mountain specific)		
Saturday or Sunday Season Pass/4 week Lesson Pkg (Valid either Saturday	\$249	\$289
or Sunday for the season, 9am-5pm/mountain specific)		
Saturday PM Season Pass & 4 week Lesson Pkg (Valid Saturday night for	\$179	\$209
the entire season, 4pm close, Labrador ONLY)		
Full Season Pass – NO LESSONS – valid anytime either mountain	\$429	\$599

RENTALS	FEE	TAX	TOTAL
Ski and Snowboard	\$144	\$11.52	\$155.52
Helmet	\$54	\$4.32	\$58.32

MEAL PLAN	FEE	TAX	TOTAL
Meal (6 weeks)	\$84	\$6.72	\$90.72

<sup>\*\*\*\*</sup> PLEASE MAKE ALL CHECKS PAYABLE TO: Song or Labrador Mountain \*\*\*\*

Lesson Information: When filling out the Group Pass form for your child, please have your child indicate in the furthermost right column next to pass holder name if they will be taking a ski or snowboard lesson. Time, ability level and type (ski or board). If not taking a lesson please state that as well.

Helmet Rental: While we feel wearing a helmet is a personal choice, and though not mandatory, SkiCNY recommends wearing a helmet and strongly encourages your students to either purchase or rent. For further information on helmets and skiing, please refer to LidsOnKids.org.

### Meal Plan:

As an added convenience, SkiCNY offers a 6x meal plan.

- Meal plans are loaded onto the student's season pass. Meal plans are good for the Café's at either mountain.
   The students pass has a hamburger icon which the student needs to show to the cashier each time they would like to redeem a meal plan. We can accommodate guests with food allergies.
- Each meal is good for:
  - Main Entree: hamburger, cheeseburger, hotdog, pizza slice, mozzarella sticks, chicken nuggets, or pre-packaged sandwich.
  - o French Fries.
  - Drink: small fountain soda, white or chocolate milk.

### **Program Benefits:**

 One day per week program passes valid for lift privileges for the entire season that same day before and after the program.

<sup>\*</sup>Meal Plans are non-refundable and cannot be transferred to another season.