



WINTER CAMP REGISTRATION FORM



FILL OUT ENTIRE REGISTRATION FORM FOR EACH PARTICIPANT

Personal Information	New <input type="checkbox"/> Return <input type="checkbox"/>				
	Last Name	First	Female <input type="checkbox"/>	Age	Cell Number
			Male <input type="checkbox"/>		
	Address		City	Postal Code	
	Email			Home Number	
Email Authorization: Indicate if you would like to receive Lakeridge news and updates.		Yes <input type="checkbox"/>	No <input type="checkbox"/>	Photo Authorization: Please indicate if you give permission for your child's photo to be taken.	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	
				No <input type="checkbox"/>	

Ability	Lesson Type:	Ski <input type="checkbox"/>	Snowboard <input type="checkbox"/>	Both <input type="checkbox"/>	If returning, indicate last level completed for skiing			If returning, indicate last level completed for snowboarding								
	Number of times the participant has SKIED and/or SNOWBOARDED before				SKI						SNOWBOARD					
					0	<5	5+	10+	15+	25+	0	<5	5+	10+	15+	25+
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The participant feels most comfortable SKIING and SNOWBOARDING on the following hills				SKI						SNOWBOARD						
				New (N/A)	<input type="checkbox"/>	Green (Beginner)	<input type="checkbox"/>	New (N/A)	<input type="checkbox"/>	Green (Beginner)	<input type="checkbox"/>					
				Blue (Intermediate)	<input type="checkbox"/>	Black (Advance)	<input type="checkbox"/>	Blue (Intermediate)	<input type="checkbox"/>	Black (Advance)	<input type="checkbox"/>					

Dates	Pick Your Program Date(s)											
	Holiday Camp Week 1:	December	19 th	<input type="checkbox"/>	20 th	<input type="checkbox"/>	21 st	<input type="checkbox"/>	22 nd	<input type="checkbox"/>	23 rd	<input type="checkbox"/>
	Holiday Camp Week 2:	December	27 th	<input type="checkbox"/>	28 th	<input type="checkbox"/>	29 th	<input type="checkbox"/>	30 th	<input type="checkbox"/>		
	March Break Camp:	March	13 th	<input type="checkbox"/>	14 th	<input type="checkbox"/>	15 th	<input type="checkbox"/>	16 th	<input type="checkbox"/>		

Request	If enrolling with a friend/friends in the same lesson type (ski/snowboard/both) and would like to be placed in a group together, please provide their full name(s) here. (Requests are not guaranteed)	Full Name:	<input type="text"/>
		Full Name:	<input type="text"/>
		Full Name:	<input type="text"/>
		Full Name:	<input type="text"/>

Rentals	Complete this section if Equipment Rentals are Required				Height	Weight	Shoe Size	Helmet Select check box if you require a helmet rental <input type="checkbox"/>
	Name	SKI <input type="checkbox"/>	SNBD <input type="checkbox"/>					

Payment	Payment Type:	Visa <input type="checkbox"/>	Mastercard <input type="checkbox"/>	Total:
	Name of Cardholder:			Card Number:
	Cardholder Address: (If different from address above)			Expiry:

NOTICE TO SKIERS, SNOWBOARD, SNOW TUBE RIDERS AND LIFT PASSENGERS

Exclusion of Liability – Assumption of Risk

The use of these premises and facilities and participation in activities on the premises are subject to the conditions set out in the Exclusion of Liability and Assumption of Risks Notice, which is posted throughout the premises. These conditions will affect your legal rights including the right to sue for negligence or breach of contract or claim compensation following an accident.

THE SKI AREA OPERATOR'S LIABILITY IS EXCLUDED BY THE TERMS OF THESE CONDITIONS. PLEASE SKI AND RIDE CAREFULLY

Parent/Guardian Signature

Print Name

Date

LAKERIDGE WINTER CAMP MEDICAL FORM

Child's Name: _____

Heath Card Number: _____

Has the child suffered from a concussion? YES NO

Date of Injury _____

Emergency Contact Information:

1. Parent/Guardian Name: _____ Relationship: _____

Home #: _____ Work#: _____ Cell #: _____

2. Parent/Guardian Name: _____ Relationship: _____

Home #: _____ Work#: _____ Cell #: _____

MEDICAL INFORMATION

Important message: We are not a nut free facility, but we will take every precaution for those with nut allergies

Allergies (please be specific)

Does your child require an Epi-pen? YES NO

Does your child require any medication? YES NO

Other medical Concerns:

LAKERIDGE RESORT LIMITED

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT
(hereinafter referred to as the "Release Agreement") - *PLEASE READ CAREFULLY!*

BY SIGNING THIS DOCUMENT YOU WILL WAIVE OR GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE FOR NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF THE OCCUPIERS' LIABILITY ACT OR CLAIM COMPENSATION FOLLOWING AN ACCIDENT

This Release Agreement shall apply to all subsequent pass & card renewals.

PARTICIPANTS INITIALS:	GUARDIAN'S INITIALS:	N/A	N/A	N/A
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TO: LAKERIDGE RESORT LIMITED and its directors, officers, employees, instructors, agents, representatives, volunteers, independent contractors, subcontractors, sponsors, successors and assigns (hereinafter collectively referred to as the "Releasees").

SECTION 1: ACKNOWLEDGEMENT OF RISKS – PLEASE READ CAREFULLY!

I am aware that skiing, snowboarding and participating in snow school lessons, clinics and sessions (collectively referred to as the "Activity") involve many risks, dangers and hazards including, but not limited to: boarding, riding and disembarking ski lifts; changing weather conditions; avalanches; exposed rock, earth, ice, and other natural objects; trees, tree wells, tree stumps and forest deadfall; the condition of snow or ice on or beneath the surface; negligent first aid; failure to act safely or within one's own ability or to stay within designated areas; negligence of other persons; and **RISKS RESULTING FROM THE NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY DUTY OF CARE ON THE PART OF THE RELEASEES. I UNDERSTAND THAT NEGLIGENCE INCLUDES FAILURE ON THE PART OF THERE LEASEES TO TAKE REASONABLE STEPS TO SAFEGUARD OR PROTECT ME FROM, OR WARN ME OF, THE RISKS, DANGERS AND HAZARDS.**

I also understand that other risks include variations in the terrain which may create blind spots or areas of reduced visibility; variations in the surface or sub-surface, including changes due to man-made or artificial snow; variable and difficult conditions; streams, creeks, and exposed holes in the snow pack above streams or creeks; cliffs; crevasses; snowcat roads, road-banks or cut-banks; collision with lift towers, fences, snow making equipment, snow grooming equipment, snowcats, snowmobiles or other vehicles, equipment or structures; encounters with domestic and wild animals including dogs and bears; exposure to **INFECTIOUS DISEASE CONTRACTED THROUGH VIRUSES, BACTERIA, PARASITES, AND FUNGI WHICH MAY BE TRANSMITTED THROUGH DIRECT OR INDIRECT CONTACT**; collision with other persons; loss of balance or control; slips, trips and falls; and accidents during participation in the Activity.

I am also aware that the risks, dangers and hazards referred to above exist throughout and beyond the ski area and that many hazards are unmarked.

SECTION 2: ASSUMPTION OF RISKS – PLEASE READ CAREFULLY!

I FREELY ACCEPT AND FULLY ASSUME ALL THE RISKS, HAZARDS, AND DANGERS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, OR PROPERTY DAMAGE (AS SET OUT IN SECTION 1) WHILE ENGAGED IN OR AS A RESULT OF MY VOLUNTARY PARTICIPATION IN THE ACTIVITY

PARTICIPANTS INITIALS:	GUARDIAN'S INITIALS:	N/A	N/A	N/A
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SECTION 3: RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT. THIS CONDITIONS WILL AFFECT YOUR LEGAL RIGHTS – PLEASE READ CAREFULLY!

IN CONSIDERATION OF the Releasees accepting my application for a Season Pass and permitting my use of the lifts, ski runs, trails, terrain parks, race courses, restaurants, day lodge, parking, access roads and other ski area facilities (hereinafter "the premises"), I hereby agree as follows:

- I AM GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE**, that arise or result from in whole or in part, participating in the Activity and, without limitation, claims arising out of or resulting from THE NEGLIGENCE, BREACH OF CONTRACT, BREACH OF ANY DUTY OF CARE OWED BY THE RELEASEES UNDER THE *OCCUPIERS' LIABILITY ACT*;
- WAIVE ANY AND ALL CLAIMS THAT I HAVE OR MAY HAVE IN THE FUTURE** against the Releasees;
- RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, EXPENSE, AND INJURY AND DEATH, INCLUDING ANY CLAIM FOR CONTRIBUTION AND INDEMNITY, that I may suffer from my participation in the Activity DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT AND ANY DUTY OF CARE OWED TO ME BY THE RELEASEES UNDER THE OCCUPIERS' LIABILITY ACT.** I UNDERSTAND THAT NEGLIGENCE INCLUDES THE FAILURE ON PART OF THE RELEASEES TO TAKE REASONABLE STEPS TO SAFEGUARD OR PROTECT ME FROM OR WARN ME OF THE RISKS, DANGERS AND HAZARDS REFERRED TO ABOVE; and
- INDEMNIFY AND HOLD HARMLESS** the Releasees from any and all liability, including claims for contribution and indemnity, for any damage to property of or personal injury to, any third party, resulting from my, or my family member or next of kins, use of the Releasees' property or participation in the Activity.

PARTICIPANTS INITIALS:	GUARDIAN'S INITIALS:	N/A	N/A	N/A
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- AGREEMENT BINDING** - This Release Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
- JURISDICTION** - This Release Agreement and any rights, duties and obligations as between the parties to this Release Agreement shall be governed by and interpreted solely in accordance with the laws of Ontario and no other jurisdiction. Any litigation involving the parties to this Release Agreement shall be brought solely within Ontario, and shall be within the exclusive jurisdiction of the Courts of Ontario; and
- SEVERABILITY** - If any provision of this Agreement is determined by a court of competent jurisdiction to be invalid, illegal or unenforceable in any respect, such determination shall not impair or affect the validity, legality or enforceability of the remaining provisions hereof, and each provision is hereby declared to be separate, severable and distinct.

In entering into this Release Agreement, I am not relying upon any oral or written representations or statements made by the Releasees with respect to the safety of skiing or snowboarding other than what is set forth in this Agreement.

The Season Pass issued to the Passholder is the property of Lakeridge Resort Limited, is not transferable, not for resale and is revocable for misconduct or breach of the Alpine Responsibility Code.

I HAVE READ AND UNDERSTAND THIS RELEASE AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, ASSIGNS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.

Name of Participant <i>(Print clearly)</i>	Date of Birth <i>(mm/dd/yy)</i>	Signature <i>(parent or guardian to sign for those under 18)</i>	Current Date
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