



AGREEMENT & RELEASE OF LIABILITY

I, _____ (Print Name) , of Oak Park Ski Club HEREBY ACKNOWLEDGE that I

have voluntarily applied to participate in _____ (Name of Trip or Event)

at _____ Location), On _____ (Dates)

I AM AWARE THAT SNOW SKIING, SNOWBOARDING AND RACING ARE HAZARDOUS ACTIVITIES, AND I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT ANY AND ALL LIABILITY AND ANY AND ALL RISKS OF INJURY OR DEATH. _____ (Initial)

In consideration of the sum of One (\$1.00) Dollar and other good and valuable consideration, receipt of which is hereby acknowledged, I hereby agree that I, my heirs, legatees, guardians, legal representatives and assigns will not make a claim against, sue, attach to property of, or prosecute Oak Park Ski Club and its directors, officers, agents, representatives and members for injury or damage resulting from the negligence or other acts, howsoever caused, by any director, officer, agent, representative or member of Oak Park Ski Club as a result of my participation in any and all snow skiing activities and as a result of any participation in any and all other Oak Park Ski Club activities. In addition, I hereby release and discharge Oak Park Ski Club and its directors, officers, agents, representatives and members from any and all actions, claims or demands I, my heirs, legatees, guardians, legal representatives, or assigns now have or may hereafter have from injury or damage resulting from my participation in any and all snow skiing activities, participation in any and all other Oak Park Ski Club activities and resulting from the negligence or carelessness on the part of persons aforementioned or Oak Park Ski Club.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND OAK PARK SKI CLUB AND SIGN IT OF MY OWN FREE WILL. _____ (Initial)

Dated: _____ Signature: _____

EMERGENCY NOTIFICATION:

Name: _____ Relationship: _____ Phone: _____

Drug or Food Allergies: _____ Other medical conditions: _____

This form must be completed and turned in before an airline seat will be ticketed in your name! Make sure you initialed in both places, signed and dated and listed an emergency contact person who is NOT on the trip. Complete and return this form to your Club's trip leader no later than 60 days prior to trip departure.