



# Kronenstadt Ski Club

## TRIP APPLICATION AND GENERAL RELEASE, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT (ONE APPLICATION PER TRIP)

Trip to: **Mammoth Mountain** Date: (circle one) December 8-13, 2019 January 5-10, 2020 January 26-31, 2020  
February 16-21, 2020 March 8-13, 2020 March 29-3, 2020

### RELEASE AND WAIVER OF LIABILITY

In consideration for being accepted as a trip participant, the UNDERSIGNED, for himself or herself and personal representatives, assigns, heirs, next of kin, or either of them: HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS not to sue the Kronenstadt Ski Club, its officers and members (for all purposes herein referred to as 'RELEASEES') from all liabilities to the UNDERSIGNED, his or her personal representatives, assigns, heirs, next of kin for all loss or damage and any claim or demands therefore on account of injury to the person or property or resulting death of the UNDERSIGNED, WHETHER CAUSED BY NEGLIGENCE OF THE RELEASEES OR OTHERWISE while the UNDERSIGNED is participating in the above trip. The UNDERSIGNED expressly agrees that the foregoing RELEASE AND WAIVER OF LIABILITY is intended to be as broad and inclusive as is permitted by the laws of the State of California and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

### ASSUMPTION OF RISK

The UNDERSIGNED hereby warrants that he or she is fully aware of the risks and hazards inherent in participating in the above trip and in any event related thereto, including but not limited to, the sport(s) of alpine skiing, snowboarding, white-water rafting, and/or water skiing, and hereby elects to participate. The UNDERSIGNED hereby VOLUNTARILY ASSUMES ALL RISK OF LOSS, DAMAGE OR INJURY that may be sustained by him or her and any damage to property of the UNDERSIGNED while participating in the above trip.

### INDEMNITY AGREEMENT

The UNDERSIGNED hereby AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the RELEASEES and each of them from any loss, liability, or damage they may incur due to the presence, or any action of, the UNDERSIGNED in the above trip, whether caused by the RELEASEES or otherwise. The UNDERSIGNED has read and voluntarily signs the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, and INDEMNITY AGREEMENT.

Dated: \_\_\_\_\_ Signature \_\_\_\_\_

Amount: **\$265.00** Mid-Week Please Print Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Preferred Roommate Request: \_\_\_\_\_  
If desired, enter name (request or room assignment cannot be guaranteed)

IN CASE OF EMERGENCY, please notify: Name: \_\_\_\_\_ Phones: \_\_\_\_\_