



NATIONAL SKI PATROL SYSTEM
CMVSP YOUNG ADULT PROGRAM RELEASE FORM

I agree I am voluntarily participating in the Crystal Mountain Volunteer Ski Patrol Young Adult Patroller educational program ("CMVSP YAP Program"). I understand that the CMVSP YAP Program may involve extensive field work on simulated first aid scenarios, skiing, and toboggan orientation along with other activities which ski patrollers encounter in their duties of patrolling a ski area. I realize there are inherent risks in this type of activity including changing weather conditions, changing snow surface conditions, ice, bare spots, rocks, stumps, trees and the possibility of collisions with manmade and natural objects or other skiers and such activity can be dangerous and can result in serious injury or death. I knowingly assume the risk of participation and understand I can withdraw from the CMVSP YAP Program at any time. I understand that by participating in this CMVSP YAP Program I may also encounter additional risks not inherent to a normal participant to the sport of skiing. I agree to personally assume all of these risks. I also agree that I will rely solely on my own judgment regarding my personal safety and ability with regard to the terrain, circumstances and conditions in which I may be placed upon and asked to demonstrate or perform to accomplish the tasks involved in the CMVSP YAP Program, and that I will decline to perform any activities if I believe I am placing myself in an unsafe situation or subject to possible injury or death if I proceeded. As a requirement of this CMVSP YAP Program, I acknowledge that I agree to waive any right I might have to file a lawsuit for any injury or death resulting from my participation in the CMVSP YAP Program and I hereby release and forever discharge Alterra Mountain Company, Crystal Mountain, the National Ski Patrol System, Incorporated and its members, the Crystal Mountain Volunteer Ski Patrol, their parents, subsidiaries, affiliated entities, owners, officers, employees, agents, and volunteers, both individually and jointly, and I agree that no one else may file a lawsuit in my name related to my participation in the YAP Program. If any part of this Release shall be determined to be unenforceable, all other parts shall be given full force and effect.

Participant Signature: _____
Date: _____
Participant Name (printed): _____
Address: _____
Phone: _____

ADDENDUM TO RELEASE

The above Participant is less than 18 years of age; the undersigned parent or guardian hereby consents to the above Participant participating in the YAP Program and signs this Release on behalf of the Participant.

Parent/Guardian Signature: _____
Date: _____
Parent/Guardian Name: (printed): _____
Address: _____
Phone: _____

Not part of Release and for record keeping purposes only.

To be completed by CMVSP YAP Program Administrator:

Date: _____ Event/Training: _____ Location: _____