

**RELEASE FROM LIABILITY – PLEASE READ CAREFULLY**

I understand and accept the fact that mountain biking, in its various form, and hiking, are hazardous sport that have many dangers and risks. I realize that injuries are a common and ordinary occurrence in these sports. I agree, as a condition of being allowed to use the ski area facility and premises, that I freely accept and voluntarily assume all risks of personal injury or death or property damage, and release Terry Peak Ski Area and its agents, employees, directors, officers, and shareholders from an and all liability for personal injury or property damage which results in any way from negligence, conditions on or about the premises and facilities, the operation of the ski area including, but not limited to, uneven terrain, grooming, snowmaking, ski lift operations, actions or omissions of employees or agents of the area, or my participation in mountain biking or other activities at the area, accepting myself the the full responsibility for an and all such damage or injury of any kind which ma result.

**CONDITIONS OF USE: NO REFUNDS – NO TRANSFERS**

I, the undersigned, have read and understood the terms of the above Season’s Pass and the release Agreement which is an essential part of it. I am signing it freely and of my own accord, realizing it is binding upon myself, my heirs and assigns, and in the event that I am signing on behalf of any minors, that I have full authority to do so, realizing its binding effect on the as well as myself.

As a condition of holding a Season’s Pass identification card an being permitted to use any and all of the facilities of the ski area, I further agree to assume all risk of personal injury or loss or damage to any of my property

**PASS HOLDER NAME MUST HAVE A RELEASE SIGNATURE**

PASS HOLDER NAME \_\_\_\_\_ DATE \_\_\_\_\_ RELEASE SIGNATURE \_\_\_\_\_  
 (PRINT) (SIGNED) (PRINTED)

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 (PRINT) (SIGNED) (PRINTED)

**Form Below Must Be Filled Out To Complete Processing**

Gender									Pass Amount
M/F	D.O.B.	First Name	Last Name	Mailing Address	City	State	Zip	Phone#	Adult or Jr. \$150
<b>CASH OR CHECK ONLY, Sorry No Credit Cards. ALL SALES FINAL! NO REFUNDS OR TRANSFERS!</b>									<b>Pass Sub Total</b>
									\$
<i>Release Form above must be signed by all adults and/or legal guardians.</i>									<b>Total Amount \$</b>
									\$