SEASON PASS APPLICATION

Mail or Fax to: **TERRY PEAK SKI AREA**
21120 Stewart Slope Road
Lead, SD 57754

(Photocopy if necessary)

Phone: (605) 584-2165
or: (605) 342-7609

☐ Master Card ☐ Visa ☐ Discover Exp. Date_____ (REQUIRED)

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FORM BELOW MUST BE FILLED OUT TO COMPLETE PROCESSING

Gender (M or F)	D.O.B.	First Name	Last Name	Mailing Address	City	State	Zip	Phone #	Pass $$ Amt.	Ins. $$ Amt.

ALL SALES FINAL! NO REFUNDS OR TRANSFERS!

Release form must be signed by all adults and/or legal guardians.

SUBTOTAL $$ PASSES & INSURANCE ☛		
TOTAL $$ AMOUNT ☛		

RELEASE FROM LIABILITY FORM – PLEASE READ CAREFULLY

I understand and accept the fact that alpine skiing, in its various forms, and snowboarding, are hazardous sports 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 Black Hills Chair Lift Company, dba Terry Peak Ski Area and its agents, employees, directors, officers, and shareholders from any 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 operations of the ski area including, but not limited to, grooming, snowmaking, ski lift operations, actions or omissions of employees or agents of the area, or my participation in skiing or other activities at the area, accepting myself the full responsibility for any and all such damage or injury of any kind which may 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 them as well as myself.

As a condition of holding a Season's Pass identification card and 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 _____ (Print) DATE_____ RELEASE SIGNATURE_____ (Signed) _____ (Printed)

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A Release From Liability Form signed by each adult and/or legal guardian must be in our file before pass will be issued. Additional release forms may be photocopied or downloaded at terrypeak.com.