

LOST TRAIL POWDER MOUNTAIN

2019-2020 SEASON PASS &/OR 10 DAY PASS FORM

INDIVIDUAL RATES (regular pricing)

ADULT	\$574.00
CHILD (6 TO 12)	\$474.00
GOLDEN AGER (60-69)	\$499.00
SENIORS 70+	\$174.00

FAMILY RATES* (regular pricing)

FAMILY OF 3	\$1549.00
FAMILY OF 4	\$1924.00
FAMILY OF 5	\$2299.00
FAMILY OF 6	\$2674.00

10 DAY PASSES (Transferable)

ADULT	\$399.00
CHILD	\$299.00

*A FAMILY IS DEFINED AS PARENT & THEIR CHILDREN 19 YEARS & YOUNGER.

CHILDREN 5 & UNDER ARE FREE!

Prices are not negotiable

MAKE CHECKS PAYABLE TO LOST TRAIL SKI AREA

CLIP AND MAIL YOUR APPLICATION TO:

LOST TRAIL - PO BOX 311 - CONNER, MT 59827

406-821-3742 Website: www.losttrail.com

E-mail: ski@losttrail.com

APPLICATION FORM

I/We understand individual passes must be presented at the ticket counter for a day lift ticket. Season pass privileges are not transferable. 10 day passes are transferable. Abuse of any pass will constitute loss of all privileges. I/We understand there are inherent and other risks in snow sports and I/We assume and accept full responsibility of those risks. I/We will not hold Lost Trail Ski Area Inc liable for any injury, death or property loss that could occur. There will be a \$15.00 processing fee for lost/stolen season passes.

Signature _____ Email Address _____

NAME (List family members individually)	AGE	CIRCLE YOUR PURCHASE	(OFFICIAL USE ONLY)
			PASS #
_____	_____	10 DAY/SEASON PASS _____	_____
_____	_____	10 DAY/SEASON PASS _____	_____
_____	_____	10 DAY/SEASON PASS _____	_____
_____	_____	10 DAY/SEASON PASS _____	_____
_____	_____	10 DAY/SEASON PASS _____	_____
_____	_____	10 DAY/SEASON PASS _____	_____

Mailing Address _____ City/Zip _____

Amount Paid _____ Date _____ Phone: _____

Card #: _____ Exp Date: _____ Signature: _____