

LOST TRAIL RELEASE FORM

Name of Competitor: _____ Ski Snowboard (Circle one)

Address: _____

City: _____ State: _____ Zip: _____

Age: _____ Date of Birth: _____

Sex (check one): Female

Male

RELEASE OF LIABILITY

I acknowledge that competing (or having my child compete) in the Cold Smoke Freeride at Lost Trail and related activities to skiing and boarding are hazardous activities and that I have made a voluntary choice to participate in those activities despite the risks they present. In consideration of my being permitted to participate in Cold Smoke Freeride at Lost Trail, I agree to assume any and all risks of injury or death, which might be associated with or result from my participation in this event. I accept all such risks on behalf of myself and/or my minor child.

INITIAL HERE: _____

I further agree to release from liability and to indemnify and hold harmless the organizers and sponsors of this event, Lost Trail Ski Area, Inc. and their owners, agents, land owners, affiliated companies and employees for any damage, injury or death to myself or to any person or property, whether caused by their negligence or for any other reason, in any way connected with my preparation or practice for or my participation in this completion.

INITIAL HERE: _____

I hereby request to participate, or to have my minor child participate, in The Cold Smoke Freeride being conducted at Lost Trail Ski Area, Inc. I understand that this type of competition or race is dangerous. I agree to visually and physically inspect the course, the adjacent areas, before using the racecourse. I am aware that natural and manmade obstacles exist and accepted whether they are marked or unmarked. By my use of the racecourse, I assume all risks, including the condition of the course and the adjacent areas.

INITIAL HERE: _____

I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY, UNDERSTAND IT, AND ACCEPT ITS TERMS.

Competitor Name

Competitor Signature

Parent or Guardian Name

Parent or Guardian Signature

Date: _____