

**JANUARY 2012 LEARN TO SKI / SNOWBOARD
REGISTRATION**

Name _____ Age _____

Shoe Size _____

Please Circle Ski Snowboard

Address _____

City _____ State _____ Zip _____

Phone (____) _____

Email _____

RELEASE FROM LIABILITY

I recognize that skiing/snowboarding is a vigorous sport. I accept the risks that are inherent in skiing/snowboarding. I acknowledge my responsibility to ski/snowboard safely, and to be in control at all times. In consideration of acceptance of my enrollment, I release Great Bear Recreation Park, Inc., the city of Sioux Falls, and their agents and employees from all claims, liabilities or costs which arise out of my travels to or from participation in the Great Bear Snowsports School programs.

Students Signature _____ Date _____

Parents/Guardians Signature _____ Date _____

