



Child Ski Center

<input type="checkbox"/> Full Day <input type="checkbox"/> Full Day Lunch <input type="checkbox"/> 1/2 Day <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.



Registration Form

Please Print:

Name of Student: _____
 Today's Date: _____ Child's Age: _____ Sex: _____ Birth Date: _____
 Parent/Guardian Name: _____
 Mailing Address: _____
 City / State / Zip: _____
 Home Phone: _____ Email Address: _____
 Local Lodging: _____ Phone #: _____
 Skiing / Snowboarding Ability: _____ Has your child ridden a chair lift? _____ assisted unassisted
 Emergency Contact Number: _____ Cell phone: _____

We reserve the right to refuse admittance to any child we feel is in poor health, or that does not enjoy our ski / snowboard program.

I, the undersigned, as the parent / guardian of this minor, have the authority to enter into this contract on behalf of said minor and on behalf of any other parent / guardian of said minor (all collectively referred to as "we").

DESCRIPTION OF SERVICES

1. We understand that Diamond Peak Ski Resort (Diamond Peak) is owned and operated by the Incline Village General Improvement District (IVGID) and that the Bee Ferrato Child Ski Center and Rental Shop are a departments of Diamond Peak.
2. We understand that certain skiing facilities are provided at Diamond Peak and that such facilities are available to minor persons whether or not they are accompanied by an adult.
3. In case of a malfunction of the minor's equipment, we authorize Diamond Peak to replace with Diamond Peak equipment if required so that the minor may continue participation in the program.
4. We further understand and consent to allow the participating minor to be transferred from an outdoor program to the Child Ski Center facility if, in the discretion of Child Ski Center staff, the participant is having difficulty with the outdoor program.

ASSUMPTION OF RISKS

5. We understand that skiing / snowboarding involves inherent risks and a copy of the "Inherent Risks of Skiing / Snowboarding," as defined by Washoe County Code, can be made available to me at Guest Services upon my request.
6. We understand that any minor participating in skiing or any other activities at Diamond Peak will be exposing himself or herself to the risk of bodily injury or property damage due to the nature of such activities and we assume such risks.
7. We understand that the minor's participation in the Ski/Snowboard Program may require the use of ski lifts and that the minor may ride lifts alone, with an instructor, with other guests or with other children. We understand that the use of the lifts involves a potential risk of injury while loading, riding and unloading from a lift, including a risk of falling from a chair. We accept and assume such lift related risks. **INITIAL** _____

CONSENT FOR EMERGENCY MEDICAL CARE AND RELEASE OF MEDICAL INFORMATION

8. We understand that Diamond Peak may furnish first aid care, including but not limited to, transporting or arranging for the transportation of the injured minor to a facility where medical care may be provided at the cost of the parent or guardian of the minor. The furnishing of such care is in no way an admission of, or assumption of, liability on the part of Diamond Peak Ski Resort or its owners, officers, agents, or employees. It is understood that Diamond Peak personnel will attempt to contact a parent or guardian of the minor, if possible, prior to transporting the minor by any mode of transportation to a physician and/or medical facility to render emergency medical care to said minor and we consent to such treatment.
9. It is further understood that the medical information provided on my minor, as noted on the Medical Information Card, may be released to medical personnel where medical care is required and we agree that such information be provided as needed.

GENERAL RELEASE OF LIABILITY

10. We, for ourselves and for our heirs, executors, and administrators, agree to **RELEASE, HOLD HARMLESS, AND NEVER TO SUE** Diamond Peak, IVGID, and their owners, agents, employers or representatives from all liability for personal injury or death, lost or stolen items, damage to property or any other damages, which any of us, including the minor, may suffer due to the minor's and our presence at Diamond Peak **regardless of cause to the fullest extent allowed by law.** We further agree to **DEFEND and INDEMNIFY** Diamond Peak, IVGID and their owners, agents, employers or representatives from any claim or lawsuit arising out of our presence at Diamond Peak. We agree that this contract is intended to provide as comprehensive and broad a release of liability, indemnification and express assumption of risk agreement as is legally possible.
11. I have read and understand the contents of this form and understand that this includes a **GENERAL RELEASE OF LIABILITY** and a legally binding contract between Diamond Peak, the parent/guardian of said minor and me, and I sign it of my my own free will. **INITIAL** _____

Name of Parent or Guardian: _____
(Please Print)

Signature _____ Date: _____
(Please Check One) Parent / Guardian: - **RELATIONSHIP TO MINOR** _____



Medical Information Card

Name of Student: Last: _____ First: _____ M.I.: _____

Child's Age: _____ Sex: _____ Birth Date: _____

Parent/Guardian Name: _____

Home Phone: _____ Email Address: _____

Emergency Contact Number: _____ Cell phone: _____

Personal Medical Information Regarding Child (check all that apply):

Hyper/Hypo Active Learning Disabled Behavioral Problem Epileptic Asthma Visually Impaired

Hearing Impaired Diabetic Motor Coordination Physical Imparement (Explain) _____

Other (Explain) _____

Name of Child's Physician: _____ Phone _____

The medical information provided above is current and accurate to the best of my knowledge as of the date noted below and may be released to medical personnel where definitive medical care is required. The information on this card will be kept on file only for the FY20 ___ winter season and it is the responsibility of the parent/guardian to insure that the card is updated when medical conditions of a child changes during the noted winter season.

Please Print Name of Parent or Guardian: _____

Signature _____ Date: _____

(Please Check One) Parent / Guardian: - **RELATIONSHIP TO MINOR** _____

Note : We reserve the right to refuse admittance to any child we feel is in poor health.



Child Ski Center



Rental Form

(Fill out this form ONLY if renting equipment at Diamond Peak)

Skier/Snowboarder: _____
(Last Name) (First Name)

Skiers Only (check one)

_____ TYPE I-ski conservatively at slower speeds on easy moderate slopes. Favor lower than average release settings. Entry level skiers uncertain of their classification.

_____ TYPE II-moderate skiing at a variety of speeds on varied terrain including most difficult trails. All skiers who do not meet all the descriptions of either Type I or Type III.

_____ TYPE III-aggressive, high speed skiing on steeper and more challenging terrain. Favor higher than average release settings.

Rental Shop Only

Skier / Snowboarder: Weight _____ lbs. Height _____ in. Age _____ Sex _____ Boot Size _____

Ski # _____ or Snowboard # _____

Skis Only: Sole _____ Visual Indicator Settings: LT ____ H ____ RT ____ H ____ TECH initials _____

READ THIS-IT LIMITS OUR LIABILITY

I, the undersigned, as the parent / guardian of this minor, have the authority to enter into this contract on behalf of said minor and on behalf of any other parent / guardian of said minor (all collectively referred to as "we").

We accept for use, **AS IS**, the equipment listed on this form and accept full responsibility for its care while it is in my possession. We will be responsible for the replacement, at full retail value, of any equipment rented from Diamond Peak Child Ski Center and the Rental Shop and its owners for any loss or damage of any kind, other than reasonable wear and tear, which results from the use of this equipment.

We agree to return all rental equipment by the agreed date, in clean condition, to avoid any additional charges. We accept and understand that there are inherent and other risks involved in the sport of skiing/snowboarding, for which this equipment is to be used and that injuries are a common and ordinary occurrence of this sport, and we freely assume those risks.

The Ski System: We understand that the ski/boot/binding system, **CANNOT RELEASE OR REATIN** where release or retention may prevent injury and that they therefore **CANNOT GUARANTEE MY SAFETY**. **The ski boot binding system is not designed to protect the knee.**

The Snowboard System: We understand that the binding systems on snowboards are **NOT INTENDED TO RELEASE** in a fall or upon impact and it is therefore no guarantee of my safety.

To the fullest extent allowed by law, we agree to **RELEASE FROM LIABILITY**, and to **INDEMNIFY AND HOLD HARMLESS IVGID**, Diamond Peak Ski Resort, Diamond Peak Child Ski Center, the Rental Shop, Rossignol Ski Company Inc., Burton Snowboards, all other manufactures and distributors of the equipment provided to me and its owners, agents and employees from any and all liability for damage and injury to myself or to any person or property resulting from negligence, the selection, adjustment, and use of this equipment, accepting myself the full responsibility for any and all damage or injury of any kind which may result. We have made no misrepresentation to Diamond Peak Child Ski Center or the Rental shop and its owners in regard to my height, weight, age, or skier type. We understand that the settings on my ski bindings will be set by a certified technician. **THIS IS A RELEASE OF LIABILITY AND CONTRACT BETWEEN MYSELF AND THE AFOREMENTIONED PARTIES AND I SIGN IT OF MY OWN FREE WILL.**

I have read, understand and agree to the conditions set forth on this form, including responsibility for the care and return of all equipment rented.

Please Check If Correct I confirm that we have a Medical Information Card and a Registration Form on file with Diamond Peak.

Name of Parent or Guardian: _____ Cell Phone Number _____
(Please Print)

Emergency Contact while at Diamond Peak _____

Signature _____ Date _____
(Please Check One) Parent / Guardian **RELATIONSHIP TO MINOR** _____