



Middle and High School Ski & Snowboard Challenge

Participant Information and Release Form

Registration Forms Checklist: (Please have all of these completed to turn in when registering) Passes will not be issued unless racer's paperwork is completed in full.

___ Participant Information & Release ___ Skier/Rider Liability Release ___ NASTAR Registration form
___ Registered Online for NASTAR ___ Proof of Payment ___ Rental Equipment Request (if needed)

Racer's Name: _____

Full Mailing Address: _____

Phone Number: _____ Date of Birth: _____ Gender: _____

School/Team Name: _____ Grade: _____

Coach's Name: _____

NASTAR ID: _____ Ski/Snowboard: _____ Need Rental Equipment: Yes No

I understand and accept the fact that alpine skiing or snowboarding in its various forms is a hazardous sport that has many dangers and risks. I realize that injuries are a common and ordinary occurrence of this sport. I agree, as a condition of being allowed to use the facility and premises, that I freely accept and voluntarily assume all risks of personal injury, death, or property damage, and release CATALOOCHEE SKI AREA and its program sponsors, agents, employees, directors, officers, and shareholders from any and all liability for personal injury or property damage.

I, the undersigned, have read and understand the rules associated with the Middle School and High School Ski & Snowboard Challenge at Cataloochee Ski Area. I am signing freely and of my own accord, realizing that it is binding upon heirs, my assigns, and myself, and realizing it's binding effect on them as well as myself. I further agree to assume all risk of personal injury, or loss or damage to any of my property.

Racer's Signature: _____ Date: _____

Parent's Signature: _____ Printed Name: _____

Emergency contact: _____ Phone: _____

Name of Insurance company: _____ Policy number covering student _____

OFFICE USE ONLY! Please circle one option for each. Date and Initial.

Racer purchased: Lift/Equip/Fee Package * Racer Lift Pass Only * Equipment Only * Race Fee Only * Pay by Night (Single Race)

Equipment Required: Skis Snowboard Helmet Size/Binding Setting: _____ Season Pass Holder: _____

Proof of Payment Seen by: _____ Payment Via: CK CC CASH ONLINE

Date Received Completed Paperwork: _____

APPENDIX A – NASTAR REGISTRATION FORM



Registration Form

If you have pre-registered online at NASTAR.com and you know your NASTAR Registration Number, you only need to complete the shaded portion of this form. If you have not registered for NASTAR, fill in all the fields below. Please note that your age & gender category, city, and state can be seen by others online at NASTAR.com.

Racer Information

NASTAR REGISTRATION NUMBER	BIB NUMBER

LAST NAME	MI

FIRST NAME	MI

*** E-MAIL ADDRESS (required) ***

HOME ADDRESS

CITY	STATE	ZIP	COUNTRY
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BIRTHDATE (MM-DD-YYYY)	GENDER (check one)	DISCIPLINE (check one)
	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Alpine SKI <input type="checkbox"/> Snowboard <input type="checkbox"/> Telemark <input type="checkbox"/> Snowbike

ADAPTIVE GROUPS (check one, if applicable)

<input type="checkbox"/> Sifling	<input type="checkbox"/> Cognitive Disability
<input type="checkbox"/> Standing	<input type="checkbox"/> Deaf
<input type="checkbox"/> Visually Impaired	

Team Information (if applicable)

TEAM FORMAT	RACE LEAGUE/SERIES	TEAM NAME
<input type="checkbox"/> Family / Friends Team <input type="checkbox"/> Club Team <input type="checkbox"/> Resort Team	<input type="checkbox"/> League Team	_____ <small>Indicate name of existing team or create new team name</small>

Waiver and Release of Liability

PLEASE READ CAREFULLY

I, participant, acknowledge that participating in NASTAR events ("Event") involves a RISK OF PERSONAL INJURY to me and damage to my property, and I knowingly and voluntarily agree to the terms and conditions outlined in this Waiver and Release of Liability. In exchange for being permitted to participate in the Event, I agree to the following: I am in good health and have no physical condition that affects my ability to participate in the Event and have not been advised otherwise by a medical practitioner. I agree that before I participate in any portion of Event, I will inspect the related facilities, competitor size, and equipment. I will immediately advise Event personnel of any unsafe condition that I observe. I will refuse to participate in any activity related to the Event until all unsafe conditions have been remedied. I ASSUME ALL RISKS associated with my involvement with the Event and the risk of injury caused by the condition of any property, facilities, or equipment used during the Event, which may not be reasonably foreseeable by anyone at any time. I agree and understand these risks include, but are not limited to, risks associated with marked and unmarked obstacles, slick or uneven walking surfaces, surfaces covered with ice and snow, varying weather and surface conditions, diminished visibility, rugged/mountainous terrain, variations in terrain, bumps, stumps, forest growth, downed timber, risks of various sizes, strenuous activity, high altitude, collisions, drills, exercises, free skiing, failure of protective barriers and fencing, conditions with snow machines or other equipment, sharing lift area facilities and Event venues with people directly involved and/or not directly involved in the Event and following the direction of Event personnel. I agree not to sue NASTAR, the United States Ski and Snowboard Association ("USASA"), the applicable sponsoring ski area where the Event is held, and the Event sponsors, along with their parent companies, affiliates, and their successors, assigns ("Companies"), their respective employees, agents, or other volunteers, and insurers of any of the above, for any injuries, losses, damages, claims, liabilities, or expenses that are caused or alleged to be caused by their negligent or reckless acts or omissions, insofar that are normally associated with participating in the Event, or the condition of the property, facilities, or equipment used for the Event. I agree to indemnify, defend, and hold harmless Companies and their employees, agents, volunteers, and insurers of any of the above from and against any claims, causes of action, damages, judgments, liabilities, fees (including attorney's fees), costs, and expenses incurred by Companies as a result of my unlawful actions or failure to act during the Event. I give permission for Companies to use my biography, name, and likeness in connection with the Event, and any publicity, advertising, and promotion for the Event and future editions of the Event. I waive any right that I may have to inspect or approve any finished product that may be used in connection with the Event. I assign to Companies all rights I may have to my biography, appearance, name, voice, photo, video, or film likeness that have been recorded in connection with the Event. I agree to wear appropriate safety equipment as established by common safety practices during all activities at the Event. In connection with any injury or other medical conditions I may experience during the Event, I hereby consent to receive medical treatment deemed necessary by medical personnel if I am not able to act on my own behalf. I agree not to sue any applicable medical practitioners who may provide medical treatment to me for malpractice. This Waiver is a legally binding agreement and will be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. Any provision found to be void or unenforceable shall be severed from this agreement, and not affect the validity or enforceability of any other provision. This Agreement will be construed pursuant to the laws of the State of Colorado and I agree not to contest this choice of laws provision in any legal action.

I have read this document and I understand its content. I understand that by signing below, I have given up substantial rights. I have voluntarily signed this release.

Participant Signature _____ Date _____

PARENT/GUARDIAN SIGNATURE FOR MINORS (UNDER 18 YEARS OLD)
 In order for the minor individual to participate in the Event, a parent or legal guardian MUST sign below.

BY SIGNING ON BEHALF OF A MINOR, I REPRESENT THAT I AM THE LEGAL PARENT OR GUARDIAN OF THE PARTICIPANT in the Event, and I agree to the terms and conditions contained in this agreement, and I assume responsibility for the actions of the participant.

Parent/Guardian's Signature _____ Date _____

APPENDIX B – WAIVER & RELEASE OF LIABILITY

WAIVER & RELEASE OF LIABILITY

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Signature _____ Date _____

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Parent/Guardian's Signature _____ Date _____