



Staff Use Pass # _____
 Date PD: _____
 Initials (printed): _____

Season Pass Application

Last Name	First Name	M.I.	
Mailing Address	City	State	Zip
Home Phone	Cell Phone	D.O.B (mm/dd/yyyy)	

In the event of an emergency, contact:

If the pass holder is under 18, this must be parent/guardian.

Last Name	First Name	M.I.	
Physical Address	City	State	Zip
Home Phone	Cell Phone		

Skier Responsibility Code

Skiing and snowboarding can be enjoyed in many ways. At areas, you may see people using alpine skis, snowboards, telemark skis, cross country skis, and other specialized equipment, such as that used by the disabled. Regardless of how you decide to enjoy the slopes, always show courtesy to others and be aware that there are elements of risk in skiing that common sense and personal awareness can help reduce. Observe the code listed below and share with other skiers and riders the responsibility for a great skiing experience.

- Always stay in control, and be able to stop or avoid other people or objects.
- People ahead of you have the right of way. It is your responsibility to avoid them.
- You must not stop where you obstruct the trail, or are not visible from above.
- Whenever starting downhill or merging into a trail, look uphill and yield to others.
- Always use devices to help prevent runaway equipment.
- Observe all posted signs and warnings. Keep off closed trails and out of closed areas.
- Prior to using any lift, you must have the knowledge and ability to load, ride and unload safely.

The cost of a 2016-2017 season pass is: \$200 Students (k-12), Adults: \$250, Pre-K and >70 Free

Payment by:

Check # _____ Credit Card : _____ CCID: _____
 Cash Exp Date: ___ / ___

Signatures indicate understanding and compliance with skier responsibility code. I acknowledge that The Friends of Squaw Mountain has the ability to revoke this pass for failure to comply with regulations including, but not limited to the skier Responsibility Code above. If payment is by credit card this also authorizes us to charge your card.

Signed	Printed	Date
Parent/Guardian Signature (If Under 18)	Printed	Date