

SLOPE AND SAIL, INC.

OVERNIGHT RELEASE FORM

GROUP NAME: _____
GROUP LEADER: _____
DESTINATION RESORT: _____
TRANSPORTATION COMPANY: _____
DEPARTURE DATE: _____ RETURN DATE: _____

Slope and Sail, Inc. is a snow ski trip business. The purpose of the business is to procure transportation, lodging, lift tickets and ski and snowboard rentals for groups. It is the responsibility of the group leader/leaders to promote the trip, collect funds and keep the members of their group informed as to Slope and Sail, Inc.'s prices, deposit deadlines and trip and cancellation policies for the excursion.

Slope and Sail, Inc. is an agent for the transportation company and the ski resort. Members of the group trip agree to freely accept and abide by the rules and policies of Slope and Sail, Inc., the transportation company and the ski resort.

By signing up for the trip, the patron agrees not to hold any of the officers directors, employees or agents of Slope and Sail, Inc., the transportation company, or the ski resort liable for any personal injury, property damage or injury of any kind which may result from any cause.

Skiing in its various forms is an inherently hazardous sport with many dangers and risks that cause or contribute to injuries. Injuries are a common and ordinary occurrence of the sport. Slope and Sail, Inc. is not responsible for transportation to and from medical facilities or for lodging and transportation from the resort or medical facility that is not previously contracted by the patron or the group leader.

Slope and Sail, Inc. and its agents ask that no alcoholic beverages be brought on the bus and will not be held responsible for patrons personal actions during the trip.

I, the undersigned, have read and agree to abide by the rules and policies of Slope and Sail, Inc. and its agents. I am signing it freely and of my own accord, realizing it is binding upon myself, my heirs and assigns, and in the event that I am signing it on behalf of any minors that I have full authority to do so, realizing its binding effect of them as well as myself.

Print Name Date

Signature Date

Signature of Guardian (If under 18 yrs. Old) Date

Witness Date