



2010 - 2011 Fall Season Pass Sale

Ends October 15th, 2010



Full Season Pass

	Sale Price	Full Price
UN 6 & Under	\$25	\$25
YH Youth 7-17	\$239	\$500
AD Adult 18-64	\$319	\$675
GC Gold Card	\$849	\$949
CO College	\$229	\$475
ML Military	\$229	\$475
MS Masters 70+	\$129	\$450

Order by mail, phone, fax, or online!

49° North Season Pass Dept. Phone (509) 935-6649
 PO Box 166 Fax (509) 935-4218
 Chewelah, WA 99109 www.ski49n.com

Please Print

Date _____

Name of Purchaser _____ Phone _____

Address _____

City _____ State _____ Zip _____

e-mail Please send me 49° E-mail updates!

Emergency Contact _____ Emergency Phone _____

Nordic

	Sale Price	Full Price
XC Nordic	\$89	\$99
AX Nordic w/Alpine Pass	\$49	\$99

Pass Codes	Picture Type

Name of each pass-holder

	First	Last	DOB	Code	Picture*	Price
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____

Please fill in one of the following under Picture Type.

Use Last Year = Use last year's picture and mail me my pass(es).*

Email = I will email a picture to tickets@ski49n.com.*

P/U = I will have my picture taken and pick up my pass later.

* Visit www.ski49n.com for specific instructions.

Support Local Winter Sports!

- Your donations prepare local athletes for the Olympics through 49° North Winter Sports Foundation.
- Save lives by joining or donating to the Ski Patrol.

Subtotal	_____
Sales Tax 7.6%	_____
Shipping & Handling \$5.00	_____
(Release waiver enclosed. Please mail passes.)	
Ski Patrol Donation	_____
Winter Sports Donation	_____
Total	_____

OFFICIAL USE ONLY

Payment ver. #

1. _____

Rec. by _____

Date _____

Balance Due _____

2. _____

Rec. by _____

Date _____

Balance Due _____

Comments: _____

Method of Payment. Please check one, do not mail cash.

Full Amount, enclose check or CC# Name on Card _____

1/2 Now & Pay Balance by Nov. 1, 2010 Billing Address _____
(if different than above)

1/2 Now & Auto-deduct my CC Nov. 1, 2010 CC # _____

Signature _____ Exp. Date _____ CSV# _____
(3 digit code on back)

All sales are final. Passes are non-transferable, non-refundable. Full payment must be received and release waiver signed before season pass is processed. Passes will only be mailed to billing address.

**LIABILITY RELEASE & PROMISE NOT TO SUE
PLEASE READ CAREFULLY, THIS IS A LEGAL DOCUMENT**

I. WARNING - Use of Chewelah Basin Ski Corporation (dba 49° North Mountain Resort) facilities, including but not limited to buildings, decks, parking lots and walkways, skiing, snowboarding, snowshoeing, the use of aerial and surface lifts, use of equipment, and other facilities including but not limited to buildings and parking lots, is HAZARDOUS. Falls and injuries are a common occurrence and you must keep deliberate and conscious control of your physical body, both on the ground and in the air, while properly using your equipment in variable weather and other conditions. Ski, snowboard, and snowshoe only within your ability. Safety is directly affected by your judgment in the severe elements of rough, high mountain terrain. Be alert to all risks, hazards and dangers at Chewelah Basin Ski Corporation facilities, including but not limited to: Variations in weather, variations in terrain (including terrain features, steepness and other variations, whether natural or as a result of slope design), surface or subsurface snow or ice conditions whether natural or machine-made, bare spots, rocks, trees, stumps, and other forms of forest growth or debris, lift towers and components thereof, other ski area components including lights, fences, posts, and signs, all of the foregoing whether above or below the snow surface; pole lines, snowmaking equipment, and other equipment, vehicles and machines including snowmobiles and snowcats; collision with any person, vehicle or object whether natural or man-made.

II. RELEASE FROM LIABILITY - In consideration of being permitted to use the Chewelah Basin Ski Corporation facilities I agree to RELEASE, INDEMNIFY, DEFEND AND, HOLD HARMLESS Chewelah Basin Ski Corporation its agents, officers, directors, owners, contractors, volunteers, employees and insurers (COLLECTIVELY, THE "Released parties") from any and all claims I might bring as a result of physical injury, including death, or property damage sustained in connection with my use of the Chewelah Basin Ski Corporation facilities INCLUDING CLAIMS BASED ON NEGLIGENCE OR BREACH OF WARRANTY. I am fully aware of and accept all risks, hazards and dangers associated with using the Chewelah Basin Ski Corporation facilities and I am fully responsible for any and all damage or injury of any kind that may result from my use of the Chewelah Basin Ski Corporation facilities. I promise not to sue the Released Parties and agree that if anyone is physically injured or property is damaged while I am using the Chewelah Basin Ski Corporation facilities, I will have no right to make any claim or file a lawsuit against the Released Parties.

III. MINORS - For Season Pass Holders under 18 Years Old: As parent or guardian of the child named as Passholder ("Child") I have authority to enter into this agreement on behalf of the Child. To the fullest extent allowed by law, I agree to INDEMNIFY, DEFEND AND HOLD HARMLESS the Released Parties for any and all claims whatsoever brought by the Child and all claims whatsoever brought by third parties arising in connection with the Child. I acknowledge that I have read and understand this document and am signing it on behalf of the Child and that the Child and I will be bound by all its terms. I agree to be responsible for all medical expenses incurred by the Child.

IV. MEDICAL TREATMENT OF MINORS - I hereby authorize any duly authorized doctor, emergency medical technician, registered ski patroller, hospital or other medical facility to treat any children listed on this form as "Passholder" for the purpose of attempting to treat or relieve any injuries received while being transported to or from the Chewelah Basin Ski Corporation facilities or while at the Chewelah Basin Ski Corporation facilities. I authorize licensed physicians to perform any procedure which they deem advisable in attempting to treat or relieve any injuries and/or related unhealthy conditions of the child that may be encountered during any necessary operation or procedure. I consent to the administration of anesthesia as deemed advisable by any licensed physician. I realize and appreciate that there is a possibility of complications and unforeseen consequences in any medical treatment, and I assume any such risk on the behalf of myself and the child. I acknowledge that no warranty is being made as to the results of any treatment. I also consent to, and accept full financial responsibility for, any form of emergency transportation and care deemed appropriate by the 49° North Ski Patrol.

V. JURISDICTION AND VENUE - This document supersedes any other agreements or representations by or between the parties and is governed by the law of the State of Washington. I intend this document to be interpreted as broadly as possible. I agree that exclusive jurisdiction and venue for any legal action shall be in Washington courts in Stevens County and such courts shall have personal jurisdiction. If any part of this agreement is determined to be unenforceable, all other parts shall still be given full force and effect.

By signing I attest that I have read, understood, and accepted the LIABILITY RELEASE & PROMISE NOT TO SUE. I have also read understood and accepted the RULES GOVERNING THE USE OF SEASON PASSES (reverse page). If younger than 18, both minor and parent / guardian signature are required.

Passholder _____	_____	Date _____
Print Name	Signature	
Passholder _____	_____	Date _____
Print Name	Signature	
Passholder _____	_____	Date _____
Print Name	Signature	
Passholder _____	_____	Date _____
Print Name	Signature	
Passholder _____	_____	Date _____
Print Name	Signature	
Parent /Guardian _____	_____	Date _____

