

REGISTRATION FORM 2012

Session Dates

- Session 1: June 24–29
- Session 2: June 29–July 1
- Session 3: July 1–6
- Session 4: July 6–8
- Session 5: July 8–13
- Session 6: July 13–15
- Session 7: July 15–20
- Session 8: July 20–22
- Session 9: July 22–27
- Session 10: July 27–29
- Session 11: July 29–August 3
- Session 12: August 3–5
- Session 13: August 5–10

If you will be attending as a Day Camper, check here:
Day Camp Only*

*Day Camp Weekday Sessions begin on the first Monday,
 Weekend Day Camp Sessions are Saturday & Sunday.

Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone: _____
 E-mail: _____
 DOB: _____
 Sex: M F
 Airport Pickup: Y N
 Roomate Request: _____

Billing Information

TOTAL ENCLOSED: \$ _____
 Check Enclosed: Y N Check #: _____
 Charge:
 MC VISA DISC AMEX
 Cardholder's Name: _____
 Card Number: _____
 Expiration Date: _____ / _____
 Security ID #: _____

Credit Card payment is preferred.

Make checks payable to: Waterville Valley Skateboard Camp
 Send to: Waterville Valley Skateboard Camp
 1 Ski Area Road
 Waterville Valley, NH 03215

Please include a copy of each campers' insurance card (front and back) with this application, as well as a copy of the Medical Form, Liability Release, and the Camp Rules document, which are all included in this packet and available for download at www.wvskate.com.

When registration form and deposit are received, you will receive a conformation e-mail. If the necessary forms were not submitted upon registration, this e-mail will contain the necessary forms to be completed and returned. All forms must be completed and returned before arrival at camp.

Pricing

Overnight Session

Weekday ... \$675
 Weekend... \$300

Deposit Policy \$100 non-refundable deposit is required per camper/per session to reserve a spot.

Day Session

Weekday ... \$350
 Weekend... \$200

Cancellation & Refund Policy
 Cancellations made less than 30 days out is non-refundable.



Contact

Camp Director: Luke Mathison
 Office: (603) 236-8311 x3440
 Fax: (603) 236-4344
 Email: lmathison@waterville.com

\$
 Register thru March 31 and save up to \$25!
parks.waterville.com has all of the details.



CAMP RULES

For the safety, protection and well being of all Waterville Valley Skateboard Camp participants, every camper must agree to obey the following basic rules:

- ✓ **Respect all coaches, counselors, and other campers.**
- ✓ **No tobacco use.**
- ✓ **No drugs or alcohol.**
- ✓ **9p.m. condo curfew strictly enforced.**
- ✓ **No theft or vandalism.**
- ✓ **No weapons, violence, or abusive language.**
- ✓ **No leaving camp boundaries.**

I understand and agree to follow the rules as stated above. I understand that my failure to comply with any of these rules may result in expulsion, black list, and/or prosecution.

Expulsion from camp for disciplinary reasons is at sole discretion of Waterville Valley Resort.

Campers are required to leave camp within 24 hours of expulsion. Any related travel costs due to camper suspension are the responsibility of the camper and/or camper's parent/guardian.

No refunds or credits will be given if camper is expelled for disciplinary reasons.

Name of Camper (print): _____

Signature of Camper: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

INSURANCE INFORMATION

A copy of each campers' insurance card is required.

Name of Camper: _____

Date of Birth: _____ Gender: M F Session: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact Information

1st Parent/Guardian Name: _____

Relationship: _____ Home Phone: _____

Cell: _____ Work: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

2nd Parent/Guardian Name: _____

Relationship: _____ Home Phone: _____

Cell: _____ Work: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Medical Care Payment & Insurance Information: A copy of your insurance card (front and back) is also required.

Guarantor (Insured): _____ DOB: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Employer Name and Address: _____

Insurance Company: _____

Insurance Company Address: _____

Contact Number: _____ Group Number: _____

Medical History: Please expand as necessary on the back of this form.

Circle *yes* or *no* for all queries; List specific information for all *yes* responses.

Medication Allergies	Yes	No	_____
Food Allergies	Yes	No	_____
Insect Allergies	Yes	No	_____
Other Allergies	Yes	No	_____
Concussions in the last year	Yes	No	_____
Any activity limitations	Yes	No	_____

Any Medication at Camp? Yes No If yes, please read the following guidelines and complete the medication list.

Name (mg, gm, mcg, etc.)	Dosage (# of pills, puffs, etc.)	Number of Times Daily / Schedule

Certification of Information and Consent for Medical Care

Information provided on this two (2) page document "Insurance Information" for above camper is accurate. I agree to update any changes in information. In the case of a minor camper it is my intention that the camper be treated as acting in loco parentis. I grant permission to Waterville Valley Resort, WVSR, LLC, to provide or seek routine and emergency medical care for listed camper. I grant permission for the hospital, clinic and/or physician that Waterville Valley Resort, WVSR, LLC, has selected to provide medical care. I grant permission for Waterville Valley Resort, WVSR, LLC, to select the mode of transportation. I accept full responsibility for the cost of transportation to a hospital or clinic. I accept responsibility for all costs associated with the medical care provided. I grant permission for the hospital, clinic or medical professional to discuss the care planned or rendered with Waterville Valley Resort, WVSR, LLC. In case of minor campers I understand that Waterville Valley Resort, WVSR, LLC, will attempt to notify me should an exam at a hospital, clinic or physician's office be sought, but not necessarily prior to the medical care being sought or rendered. Should I rescind this agreement and refuse a specific mode of transportation or refuse to seek medical care or choose to seek medical care at a different facility than that selected by Waterville Valley Resort, WVSR, LLC, I release Waterville Valley Resort, WVSR, LLC, from providing any further assistance with medical care or transportation.

Signature of Camper: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

Waterville Valley 2012 Skateboard Camp

Release of Liability, Acknowledgement of Risks and Hazards and Agreement Not to Sue

Participant: (Please Print) _____ Age: _____ Sex: _____

Address: _____ State: _____ Zip: _____

WARNING: I understand there are numerous risks and dangers inherent in the sport of skateboarding including but not limited to continually changing weather conditions and skating surfaces, ramps, bare ground, banks, boxes, rails, equipment, fences, walls, and a multitude of other objects inherent to the activities of skateboarding, as well as collisions with other participants and spectators, or any of the objects included in this release. Further, I understand that there may be other risks not known to me or reasonably foreseeable at this time. I hereby assume any and all risks of property damage, personal injury or death arising from my participation in the sport of skateboarding or my presence on the Releasees' (as described below) premises.

I, the undersigned, hereby express my desire and approval for my, and/or my child(ren)'s participation in the Waterville Valley Skateboard Camp. I acknowledge that such participation will include, without limitation, participation in various types of skateboarding instruction and activities, and the use of Waterville Valley's equipment, as well as the ramps, banks boxes, rails, fences, walls and related facilities and premises. I further acknowledge that participation in the program is voluntary and entirely at my risk and/or that of my child(ren). I acknowledge I have been (or will be) given the opportunity and been encouraged by Releasees to inspect the ramps, facilities and course PRIOR to and continuously while using the facilities. I understand and agree that, at all times while skateboarding, whether practicing or competing, I will wear an approved helmet and protective equipment. I acknowledge that no helmet can protect the wearer against all possible or foreseeable impacts and injuries to the head. Reasonably foreseeable impacts may exceed the capabilities of the helmet to protect against injury. The helmet is designed to offer added protection to the head and cannot guard against neck, spine or other bodily injuries that may result from a skateboarding accident. Therefore, I acknowledge that the use of a helmet does not and cannot guarantee my safety and/or the safety of my child(ren) and may not prevent or reduce some types of serious injuries or death.

I understand that recreational and other activities involve inherent and other risks of **INJURY** and **DEATH**. I agree that having a resort employee present does not lessen the amount or severity of the risks or hazards of these activities. I acknowledge that my and/or my child(ren)'s involvement may include skateboarding, the use of terrain ramps, jumps, rails and other objects and features and that these activities are **HAZARDOUS** and that I, on behalf of myself and/or my child(ren) have made a voluntary choice to participate in these activities despite the risks.

I hereby promise not to bring a claim against or sue, on my behalf and on behalf of my child(ren), and AGREE TO RELEASE WVSR LLC., its parent, subsidiary, affiliated and successor companies, real and personal property owners, employees, agents, coaches, shops, officers, directors and any equipment manufacturers and distributors, together with each of their officers, managers, and employees (collectively "Releasees"), **from all liability for injury, death, property loss and damage that results from participation in recreational activities, that is in any way related to my and/or my child(ren)'s participation in the Skateboard Camp, the use of the facilities, equipment and premises, in all circumstances and under all conditions, or is related to any other activity at this ski/recreational area including all liability that results from the NEGLIGENCE OF Releasees, or any other person or cause.**

I further agree to **DEFEND, INDEMNIFY and HOLD HARMLESS** Releasees for any loss or damage arising from claims or lawsuits related in any way to my and/or my child(ren)'s participation in the Skateboard Camp, use of the facilities, equipment, or any other activities on Releasees' premises. I understand that permission to use Releasees premises, and my and/or my child(ren)'s involvement in this Skate Camp is being given in exchange for the execution of this Release of Liability.

I authorize Releasees to administer first aid as they deem necessary. I authorize transportation to a medical facility, at my sole expense, if deemed necessary by Releasees. Further, in the case of serious illness or injury, if I cannot be reached, I give permission for treatment, including medical and/or surgical care necessary for the well-being of my child(ren), solely at my expense. I agree that upon transporting myself and/or the child(ren), to any medical facility, clinic or hospital, that the responsibility of the Releasees shall be totally fulfilled and the Releasees shall have no further responsibility. I understand that Releasees will, to the best of their ability; attempt to notify me as soon as possible in the event of an emergency.

I hereby grant exclusive permission to Releasees to use my and/or my child(ren)'s image(s) for the purpose of publicity, public relations, editorial, or other advertising purposes without restriction as to frequency, duration or medium.

I acknowledge that this agreement is governed by the applicable laws of the State of New Hampshire. I further agree that any action involving parties or issues relating to or arising out of participation in the Skateboard Camp and/or this agreement must be instituted and prosecuted in the state or federal courts of New Hampshire. If any provision of this agreement is determined to be unenforceable, all other provisions shall be given full force and effect. Further, I acknowledge and agree that all of the provisions of this Liability Release will be in force and survive throughout and after the 2011 Waterville Valley Skateboard Camp.

I HAVE CAREFULLY READ, UNDERSTAND, AND VOLUNTARILY AGREE TO THIS ACKNOWLEDGEMENT AND RELEASE OF LIABILITY AND AGREEMENT NOT TO SUE. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AN AGREEMENT BETWEEN MYSELF AND THE RELEASEES THAT LIMITS MY, OR MY CHILD(REN)'S, LEGAL RIGHTS AND I EXECUTE IT OF MY OWN FREE WILL. I INTEND THIS DOCUMENT TO BE INTERPRETED AS BROADLY AS PERMISSIBLE BY NEW HAMPSHIRE LAW AND UNDERSTAND THAT IT IS NOT INTENDED TO ASSERT ANY CLAIMS OR DEFENSES PROHIBITED BY LAW.

Signature (Participant): _____ Date: _____

For participants under 18 years of age: As parent/guardian of the child(ren) listed on this form, I acknowledge that I am authorized to execute this agreement on behalf of such child(ren). I acknowledge and agree that I have read the foregoing release and that by executing this release, I agree, on my behalf and on behalf of such child(ren), to be bound by its terms. I specifically agree to INDEMNIFY, DEFEND AND HOLD HARMLESS Releasees as defined on this form for any claim, suit, expense or loss which arises out of the named child(ren)'s participation in the Skateboard Camp, or which arise out of such child(ren)'s presence on the Releasees' premises.

Signature (Parent/Guardian): _____ Date: _____