



Town of Belmont

Office of Parks & Recreation

PO Box 310, 143 Main Street, Belmont, NH 03220

Phone & Fax (603) 267-1865

www.belmontnh.org

IMPORTANT: READ THIS BEFORE YOU SUBMIT YOUR REGISTRATION FORMS

Gunstock Outreach Ski and Snowboard Program

Program Dates: January 8, 15, 22, 29, 2017—(Make-up Date: February 5, 2017)

DEADLINE FOR ONLINE REGISTRATION: Tuesday, November 15, 2016 (\$25 late fee after)

Please use this check list to make sure you have properly registered for this program and submitted all the required forms:

- _____ Gunstock ONLINE Registration
 - ◆ Outreach fees are paid at time of registration
 - ◆ Rental fees (if applicable) are paid at time of registration

- _____ Belmont Parks & Recreation Registration form (pages 1 & 2)
 - ◆ Signature required on bottom of page 2

- _____ Outreach Participant Waiver (page 3)
 - ◆ Parent or Guardian signature required
 - ◆ Circle SKIER or SNOWBOARDER
 - ◆ Check off level of participant (see descriptions on website)

- _____ Check made payable to **Town of Belmont** for our fees:
 - ◆ \$5 per resident participant
 - ◆ \$15 per non-resident participant

When you have completed the online registration a signed copy of the Gunstock Waiver must accompany your Belmont Parks & Recreation waiver with our fees.

Mail To: Belmont Parks & Recreation, PO Box 310, Belmont, NH 03220

Drop Off: Belmont Parks & Recreation Office, 14 Mill Street, Belmont or Belmont Town Hall, 143 Main Street, Belmont - during normal business hours.

Please call Belmont Parks & Recreation should you have any questions.

YOUTH Registration Form

Gunstock Outreach Program: January 8, 15, 22, 29, 2017 - (Make-up February 5)

Resident: \$5 Belmont Recreation Fee - \$100 Gunstock charge paid online

Non-Resident: \$15 Belmont Recreation Fee - \$100 Gunstock charge paid online

Gunstock Rentals: \$100 Gunstock charge paid online

Check skiing or boarding and if renting equipment from Gunstock:

- Downhill Skiing:
- Snowboarding
- Gunstock Rentals

CHECK the following as they apply:

I DO NOT REQUIRE a chaperone for this child a parent/guardian will be at Gunstock each week

I DO NOT want the FREE weekly ski or board lesson for this child

The Gunstock Outreach Program includes a 1 hour ski or snowboard lesson each week for student participants. We highly recommend that all students participate but if you would prefer to opt out of the lessons please check the box above. If your child is in a chaperoned group they may be required to take a lesson if a chaperone is not available to accompany them during the lessons.

Make check payable to Town of Belmont for the recreation fees \$_____ Due: Tuesday, November 15, 2016

Participants Name _____ Age __ Grade __ Male/Female __ Date of Birth _____

Custodial Parent/Guardian Name(s) _____

Phone #1 _____ Phone #2 _____

Mailing Address _____ Town _____ State _____ Zip _____

E-mail Address (please PRINT) _____

Please provide an e-mail address that can be used for changes and cancellations in the program.

Parent/Guardian Name (residing at a different address) _____

Phone #1 _____ Phone #2 _____

Mailing Address _____ Town _____ State _____ Zip _____

E-mail Address (please PRINT) _____

Medical problems or allergies _____

Medications participant is currently taking _____

Please provide the name and address of anyone other than the parents or guardians listed above that have your permission to pick up your child from this program. **Address MUST match the PHOTO ID that will be required by the program supervisor before your child can be released.**

Name _____ Relation _____

Street Address _____ Town _____ State ____ Zip _____

Phone #1 _____ Phone #2 _____

Name _____ Relation _____

Street Address _____ Town _____ State ____ Zip _____

Phone #1 _____ Phone #2 _____

PAYMENT INFORMATION: Payment is required at the time of registration with checks made payable to the Town of Belmont. Payments can be dropped off at Town Hall or the Belmont Parks & Recreation during office hours, or mailed to arrive by the program deadline.

REFUND POLICY: A prorated refund will be offered to participants withdrawing from the program ONLY in the event of a proven injury or illness. Written requests for a refund must be submitted with a letter from the participant's physician and must be submitted within one week of injury. All refunds will be issued to Belmont Parks & Recreation at the end of April 2017. Please contact Belmont Parks & Recreation for a refund request form.



Release of Liability & Emergency Medical Information

Participation in this sport/activity may involve risk of injury. As a parent, guardian, or participant, I am aware of these hazards and whether I or the minor participant named below have the ability to participate. In consideration for participation in the program(s) listed above, I hereby for myself or the minor participant named below, waive and release all rights and claims against the Town of Belmont, its officers, employees, agents, volunteers, and supervisors, except in the case of their sole negligence, from all losses, injury, damages, fees, and other expenses, arising out of or in connection with participation in the activity.

I give my permission for myself to be treated by qualified medical personnel if I am injured, or for the minor child participant named below to be treated by qualified medical personnel in the event that the above named parent/guardian cannot be reached at the phone numbers provided; I understand that in an emergency an attempt will be made to communicate with me prior to use of this waiver.

For Hospital Information only:

Participants Doctor's Name: _____ Doctor's Phone #: _____

I understand the cancellation/refund policy is strictly enforced. If the program is cancelled by the Department, I will be notified and a full refund given. I also understand that if I miss any of the activities/classes, I may not be able to get a refund or an administrative fee may be deducted from any refund. **As a parent, guardian, or participant, I allow the Belmont Parks & Recreation Department to take my picture or the picture of my child(ren) and use it for advertising and promotional purposes.**

X	_____	_____	_____	_____
	Parent/Guardian Signature	Parent/Guardian Printed Name	Relationship	Date

Official Use Only: Belmont Resident Yes No Cash/Check # _____ Amount: _____

Received by: _____ Date: _____ Time: _____

OUTREACH PARTICIPANT RELEASE OF LIABILITY

School Name: Belmont Parks & Recreation Email Address: _____
Participant Name: _____ Age: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip Code: _____

RELEASE OF LIABILITY PLEASE READ CAREFULLY***

WARNING: All forms of skiing, snowboarding, recreational activities and the use of aerial and surface lifts are hazardous. Falls and injuries are a common occurrence. Recreational users of the ski area must use deliberate and conscious control and proper equipment, both on the ground and in the air, in relation to ever changing variables and dangers. Safety is directly affected by personal judgment in the severe elements of mountain forest terrain. Ski and/or ride within one's own ability. Be alert to continually changing weather, visibility and surface conditions and other inherent risks including but not limited to: existing and changing surface or sub-surface snow and ice conditions, dirt, grass, bare spots, forest growth, trees, rocks, stumps, and other natural objects and collisions with or falls resulting from such natural objects, lift towers and components thereof, lights, signs, posts, fences, mazes or enclosures, hydrants, water or air pipes (all the foregoing whether above or below the snow surface), snowmaking and snow grooming equipment, marked or lighted trail maintenance vehicles and snowmobiles, other man-made structures or objects and their components, and collisions with or falls resulting from such man-made objects; variations in steepness or terrain, whether natural or as a result of slope design; snowmaking or snow grooming operations, including but not limited to ski jumps, roads and catwalks or other man-made or natural terrain modifications and features including Freestyle Terrain; the presence of and collisions with other skiers and riders and the failure of others to ski and ride safely, in control or within their own ability.

I, the undersigned, hereby express my desire and approval for myself or my child's participation in the Learning Center Program. I acknowledge that such participation will include, without limitation, participation in various types of snow-sports instruction and activities and the use of Gunstock equipment, as well as the slopes, trails, Freestyle Terrain and related facilities, including ski lifts. I further acknowledge that participation in the program is voluntary and entirely at my risk and/or that of my child. 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 assume all risk of personal injury or loss of property as defined in **RSA 225A:24** (Responsibility of Skiers and Passengers).

I acknowledge that my child's involvement may include skiing, snowboarding, the use of Freestyle Terrain, lifts and participation in other recreational activities, and that these activities are **HAZARDOUS** and myself or my child have made a voluntary choice to participate in these activities despite the risks.

I hereby promise not to bring a claim against or sue, and AGREE TO RELEASE Gunstock Area, Gunstock Area Commission, the County of Belknap, their shops, employees, owners, affiliates, agents, landowners, officers, directors, and their successors in interest, any equipment manufacturers and distributors, (collectively "Releases"), **from all liability for injury, death, property loss and/ or damage that results from participation in recreational activities, that is in any way related to participation in the Learning Ctr. Program, the use of the equipment, or is related to any other activity at Gunstock including all liability that results from the NEGLIGENCE OF Releases, or any other person or cause.**

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

I authorize Releases to administer first aid as they deem necessary. I authorize transportation to a medical facility, at my expense, if deemed necessary by Releases. 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 myself or my child, at my expense. I agree that upon transporting my child, to any medical facility, clinic or hospital, that the responsibility of the Releases shall be totally fulfilled and the Releases shall have no further responsibility. I understand that Releases 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 Releases and their respective agents, clients and assign to use myself or my child's name and image(s) for the purpose of publicity, public relations, editorial, or other advertising purposes without restriction as to frequency or duration.

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 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.

I HAVE CAREFULLY READ, UNDERSTAND, AND VOLUNTARILY AGREE TO THIS ACKNOWLEDGEMENT AND RELEASE OF LIABILITY. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AN AGREEMENT BETWEEN MYSELF AND THE RELEASEES THAT LIMITS MY, OR MY CHILD'S LEGAL RIGHTS AND I SIGN IT OF MY OWN FREE WILL.

As parent/guardian of the above-named minor, I acknowledge that I am authorized to sign this agreement. I acknowledge and agree that I have read the foregoing release and that by signing this release I agree to be bound by its terms. I specifically agree to **INDEMNIFY, DEFEND AND HOLD HARMLESS** Releases as defined on this form for any claim, suit, expense or loss which arises out of the above-named minors participation in the Children's Program, or which arise out of the minor's presence on the Releases premises.



DATE: _____

SIGNATURE OF PARENT/GUARDIAN

Circle One: **Skier** OR **Snowboarder** Please check the appropriate level below

- FIRST TIME** – Appropriate for those who have NEVER skied or snowboarded before
- MOUNTAIN MAGIC** – Appropriate for those who are comfortable on the MAGIC CARPET, in the PENNY PITOU complex or GREEN CIRCLE terrain.
- MOUNTAIN ADVENTURE** - Appropriate for those who are comfortable on all GREEN CIRCLE (easiest) or BLUE SQUARE (more difficult) terrain depending on snow conditions.
- MOUNTAIN EXCITEMENT** - Appropriate for guests who are comfortable on Blue Square (more difficult) or Black Diamond (most difficult) terrain in most conditions.