

OGDEN NORDIC MEDICAL RELEASE FORM

Skier's Information

First & Last Name _____
Birthdate ____/____/____ Sex _____ Age _____ Height _____ Weight _____ Shoe Size _____
List all known allergies of this participant, including any allergies to medicine: _____

Any other medical problems that should be noted: _____

Immunization History

Are all immunizations up to date? Yes No Date of last tetanus shot: _____

Medical Information

Family Physician: _____ Phone: _____

Insurance Information

Is camper covered by medical/hospital insurance? Yes No
Carrier _____ Policy or Group # _____

Parent/Guardian Information

Name _____ Home _____ Cell _____ Work _____
Home Address _____ City _____ State _____ Zip _____
Home Phone # (____)-____-____ Cell Phone # (____)-____-____ Work Phone # (____)-____-____

Person Responsible for charges (if different from above):

Name _____ Home _____ Cell _____ Work _____
Home Address _____ City _____ State _____ Zip _____
Home Phone # (____)-____-____ Cell Phone # (____)-____-____ Work Phone # (____)-____-____

Person to notify if parent/guardian is unavailable:

Name _____ Relationship _____
Home Address _____ City _____ State _____ Zip _____
Home Phone # (____)-____-____ Cell Phone # (____)-____-____ Work Phone # (____)-____-____

As the parent/legal guardian of _____, I request that in my absence the above named skier/winter sports participant be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists and staff, duly licensed as Doctors of Medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the above minor. I have not been given a guarantee as to the results of any examination or treatment. I authorize the hospital or medical facility to dispose of any specimen or tissue taken from the above named player.

Parent/Guardian Signature Date

OGDEN NORDIC WAIVER

Skier's Information

First & Last Name _____

Parent/Guardian Information

Name _____ Home _____ Cell _____ Work _____

Home Address _____ City _____ State _____ Zip _____

Phone # (____) - _____ - _____ Email: _____

NORDIC RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT ("Agreement")*

For the "Annual" ski season-policy year of Nov 1, 2015-2016 In consideration of myself OR my child participating in the snow ski related activities, and/or other activities ("Activities") offered by Ogden Nordic. I represent that I OR my child understand the nature of these Activities and that I am and my child are qualified, in good health and in proper physical condition to participate in such Activities. I acknowledge on behalf of myself OR my child that if I OR my child believe event/Activity conditions are unsafe, we will immediately discontinue in the Activity. It is fully understood that these activities involve inherent risks and dangers of serious bodily injury, including permanent disability, paralysis and/or death, which may be caused by my OR my child's own actions or inactions, those of others participating in the Activities, the conditions in which the Activities take place, or the negligence of the 'releases' named below, and that there may be other risks known to me OR my child, or not readily foreseeable at this time; and I OR my child fully accept and assume all such risks and all responsibility for losses, costs and damages I OR my child might incur as a result of my OR my child's participation in the Activities. I hereby agree for myself and for my child to release, discharge, indemnify and covenant not to sue it's respective administrators, directors, agents, officers, volunteers, and employees, any sponsors, advertisers, and, if applicable, owners and lessors of the premises on which the Activities take place (each considered one of the "Releasees" herein), and release and discharge them from all liability, claims, demands, losses, or damages on my account caused or alleged to be cause in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, that I, or anyone on my behalf OR on behalf of my child, makes a claim against any of the Releasees I will indemnify, save and hold harmless each of the Releasees from any loss, liability, damage, or cost which may incur as the result of such claim. I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, and understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature, and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law, and agree that if any portion of this agreement/release agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

I have read and agree to the 'Terms of Agreement' above.

Parent/Guardian Signature _____
Date