



603-358-5000 | ROUTE 9; PO BOX 545; KEENE/ROXBURY, NH 03431 | INFO@GRANITEGORGE.COM |  

2019-20 Winter Youth Program Signup

Student Name: _____ Age: _____ D.O.B: _____

Medical/physical considerations: _____ School: _____

Parent/Guardian Name: _____ Phone: _____

Email: _____

Emergency Contact Name: _____ Phone: _____

Relationship to Student: _____

Tell us More!

- I was in lessons last season
- I will be skiing
- I will be snowboarding
- I will be renting equipment
- I will be renting a helmet

Select Day and Time:

- Fridays 3:30pm (Program begins January 3, 2020)
- Fridays 4:45pm
- Sundays 12:00pm (Program begins January 5, 2020)

Program Options:

- \$250- 5 weeks WYP- Lifts, lessons and rentals
- \$215- 5 weeks WYP- Lifts & Lessons

Add Helmet Rental?

- Yes, add \$45 for 5 week helmet rental
- No, I will provide my own helmet

Please submit payment in the form of check, made out to Granite Gorge and mail to POB 545 Keene, NH 03431

Waiver of Liability I understand participation in my chosen Program(s) involves exposure to the inherent risks of skiing and/or snowboarding that cannot be eliminated. I also understand participation in my chosen Program(s) may require the use of ski lifts and that I may ride lifts alone, with other guests and that the use of lift involves a potential risk of injury. In consideration of participation, I HEREBY EXPRESSLY ASSUME ALL RISK associated with participation in my chosen Program(s) including all risks associates with skiing and/or snowboarding, riding lifts, renting equipment's and skiing/riding on terrain or using equipment intended to improve or enhance skiing/riding skills. Despite my understanding of the foregoing risks, I AGREE NOT TO SUE AND TO RELEASE FROM LIABILITY AND TO DEFEND, INDEMNIFY AND HOLD HARMLESS GRANITE GORGE SKI AREA, and their representatives, owners, employees and agents for any damage or injury arising from our participations in my chosen Program(s) regardless of the cause, including ORDINARY NEGLIGENCE. In case of malfunction of my equipment, I authorize GRANITE GORGE SKI AREA employees to repair as necessary or replace with GRANITE GORGE SKI AREA equipment if required so that I may continue participation in my chosen Program(s) I understand that the foregoing in a LIABILITY RELEASE and that is legally binding on me, our heirs and our legal representatives and I sign it on my own free will. I acknowledge that the foregoing is binding during the current season. This agreement is governed by New Hampshire Law. If any provision of this agreement is determined to be unenforceable, all other provisions shall be given full force and effect. RSA 225-A: 24 RSA 0145:10. I understand all sales are final and no refunds will be granted for any reason.

Parent/guardian Name (print): _____

Parent/guardian Signature (sign): _____

Date: _____