



Your complimentary use period has ended. Thank you for using PDF Complete.

ST NORDIC SKI CLUB PARTICIPANT APPLICATION

Click Here to upgrade to Unlimited Pages and Expanded Features

Name(s) _____

Address _____

Phone number(s) (home and/or cell) _____

Emergency contact (not on trip with you) _____

Emergency contact phone number(s) _____

TRIP POLICIES

All trip participants must be paid members of NNSC.

All trip sign-ups are on a first come, first served basis. If the trip fills up, a waiting list will be started.

Unless otherwise noted, accommodations are double occupancy. Those signing up as singles will be assigned a roommate of the same gender. Individuals may reserve a double room, where available, by paying the price of a double.

Minimum payment of approximately 50% is due no less than 60 days prior to scheduled trip. Balance is due at least 30 days prior to the trip. If payment is not received within specified time, space will go to those on the waiting list. Make checks payable to Northwest Nordic Ski Club.

Cancellations made at least 30 days before the trip may result in a partial refund, depending on whether a replacement is found and on the cancellation policy of the lodging establishment. Airline tickets purchased by trip leader/club are not refundable.

I accept the above trip policies. _____ date _____

TRIP WAIVER

In making this application, I affirm that I am in good health, capable of performing the required exercise to participate, and that I accept at my personal risk the hazards of participation and will not hold Northwest Nordic Ski Club, nor its representatives, responsible. In consideration of Northwest Nordic Ski Club accepting my application, I hereby release and forever discharge Northwest Nordic Ski Club, their officers, directors, servants and agents from any liability whatsoever arising as a result of my participation, and I declare the release binding upon me, my heirs, executors, administrators and assigned.

Signature(s) _____ date _____
_____ date _____

(for trip leader use only)

Deposit amount _____ date _____ check number _____

Balance amount _____ date _____ check number _____