

2025 ALTA TOWN RACE SERIES

RACER REGISTRATION

FILL OUT AND BRING TO ALBION SKI SCHOOL OFFICE by January 23,2025

TEAM NAME: _____ (must be "family friendly")

Business Affiliation (if any)_____

Team Members (3-6 people of any league) OR Individuals:

Must have at least one female for a team

Name (Please Print Legibly)	League	Contact Info (phone)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Important: Each person must be registered in a League.

League Key:

AA - Alpine A Men

AAW - Alpine A Women

AB - Alpine B Men

ABW - Alpine B Women

TM - Telemark Men

TW- Telemark Women

Cost: \$150.00 per person. Cash, card and check payable to

Alf Engen Ski School (Race Dept.)

Important: each person must read, sign and date the statement on the following page.

ACKNOWLEDGEMENT AND ASSUMPTION OF RISK, RELEASE, HOLD HARMLESS AND INDEMNIFICATION

I know that alpine skiing is an action sport carrying significant risk of serious personal injury, death or property damage. I also know that there are natural and environmental conditions and risks, which independently or in combination with my activities may cause property damage, or severe or even fatal injuries to others or me.

I agree that I am alone responsible for my safety while participating in competitive events and/or training at Alta Ski Area. I will not hold responsible: Alta Ski Area, the promoters, sponsors, organizers, promoter clubs, officials or any agent, representative, officer, director, employee, member or affiliate of any person or entity named above, for my safety. I specifically RELEASE and DISCHARGE, in advance, those parties from any and all liability whether, known or unknown, even though that liability may arise out of negligence or carelessness on the part of persons or entities mentioned above. I agree to accept all responsibility for the risks, conditions and hazards that may occur whether they now are known or unknown.

Being fully aware of the risks, conditions and hazards of the proposed activity as a competitor, coach or official, I HEREBY AGREE TO WAIVE, RELEASE AND DISCHARGE any and all claims for damages for death, personal injury or property damage which I may have or which may hereafter accrue to me as a result of my participation in competitive events or training for competitive events, against any person or entity identified above whether such injury or damage was foreseeable.

I further agree to forever HOLD HARMLESS and INDEMNIFY all persons and entities identified above, generally and specifically, from any and all liability for death, personal injury or property damage resulting in any way from my participating in competitive events or training for competitive events. I agree that the provisions of this document shall be governed by the laws of the State of Utah without regard to any conflict of interests provisions thereof. Legal jurisdiction shall be exclusively in Salt Lake County, Utah.

I currently have, and I agree to maintain throughout the time that I train and compete, valid and sufficient medical and accident insurance. I understand that this is my sole responsibility and release all persons and entities identified above from providing this coverage for me.

This Acknowledgement and Assumption of Risk and Release shall be binding upon my heirs and assign.

Print Name

Signature

Date

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____