## 2023-2024 KANSAS CITY SKI CLUB TRIP APPLICATION

PLEASE COMPLETE IN FULL & SIGN		Sequence Number	(assigned by Trip Capta	n)
TripName		Today's Date		
Name				
Address		Membership Nur	nber	
City		State	Zip	
Phone: CellWo	rk	Home _		
E-mail (Please PRINT)				
I want to room with		I am: Male 🔿  Fen	nale 🔿 Age (if under 21)	
Trip: Air (air fare, shuttle, and lodging included) 🔘		Lodging Only (no transportation included)		
Child special rates are available only if sh	aring a hotel r	oom with 2 adults (Snow	basin and Winter Park trips only)	
Air Trip - Child in room with pa	arents 🔿	Lodging Only - Child	in room with parents O	
Lodging: Standard 2 people per Bedroor	m O	Private Bedroom (no	roommate - extra fee) О	
Shuttle Option for Lodging Only: No Th	anks 🔿	Yes (meet air group	at airport – extra fee) 🛛 🔘	
For Air Trips, please provide your full n	ame as show	n on your government	ID and date of birth below.	
Name			DOB	

**Deposit:** Enclose a check of <u>\$</u> payable to the Kansas City Ski Club **or** visit <u>www.kcskiclub.org</u> to pay by credit card. Forfeiture of \$50.00, *plus any other trip liabilities* apply toward cancellation by signee. It is the responsibility of trip participants to make payments on time. Membership in the KCSC required for participation.

## ACCEPTANCE OF CLUB RULES, RELEASE AND WAIVER OF LIABILITY

It is expressly understood that submission of the Kansas City Ski Club (KSCS) trip application is an agreement to abide by the By-e Laws and Trip Regulations of KCSC and agreement to accept the terms of the By-Laws and Trip Regulations of KCSC. The current By-Laws and Trip Regulations may be found on the club websitewww.kcsc.org on the Club Info and Awards tab.

I understand that participation in KCSC is voluntary and that there are risks and dangers involved, and I hereby asipsume any and all risks, known or unknown, of participation in this KCSC trip.

I release KCSC, its directors, officers, employees and trip captains from any and all liability for personal injuries, death or property damage in connection with this trip, including without limitation all transportation, accommodation, social and sport events and equipment provided. By this waiver, it is my intent to waive liability, hold harmless the organization and persons described above, and to covenant and agree not to sue.

I acknowledge that should I violate this agreement I agree to pay to KCSC and all other parties described above, all expenses, including attorney's fees, resulting from my actions and agree to indemnify them for all damages, including attorney's fees, which might result.

I have read and understand the above statements, and I am signing this document, granting this release.

Date			
	Member Sigi	nature or Parent Signature for Minor	
Date	Signaturo of	Junior Member age 16 or over (in addition to p	arant abova)
	Signature or	Julion Member age 10 of over (in addition to p	arent above)
Have you traveled with the KCSC?	Yes No	0	
EMERGENCY CONTACT (p	lease list a co	ontact who is not on the trip)	
Name	Relation		
Phone: Cell	Work	Home	
Address		City	State