



SKI & SNOWBOARD NIGHT SCHOOL 2020

Join the AF Recreation Ski & Snowboard Night School to learn a new activity or improve your current skills at Brighton Ski Resort. Classes are based on skill level and the number of participants, all levels are welcome.



Each Saturday includes, transportation, lesson, and night lift pass.



Boys & girls: 10 years old & up. Average of 8 Students per class



Fee includes Chartered Bus, 2 hour Ski or Snowboard Lessons, and All Night Lift Pass each time



Ski or Snowboard School at Brighton Ski Resort Must stay with either Ski or Snowboard lessons once you are registered.



Ski/ Snowboard rentals and food are **not** included. Must bring own ski or snowboard equipment, helmets are strongly recommended. Rental equipment must be arranged in advanced and brought onto the bus. Students may not do day of lesson rentals at Brighton Ski Resort.

PROGRAM DAYS

Saturdays: January 4, 11, 18, 25

Registration Deadline: December 27

(Registration is non-Refundable and non-transferable after December 27th)

REGISTER EARLY

\$240 for Bus, Lesson, and Pass

(Space is limited to the first 50 to register)

Bus picks up at the park north of Fitness Center

550 North Center at 2:30 p.m.

Returns to the park about 10:15 p.m.

Read Policies on back



BUS POLICY

1. Please be on time to the bus, both in the morning and returning in the evening, or you may be left.
2. If you are going home by another method, you must let your bus supervisor know beforehand.
3. Drop off times may change depending on driving conditions
4. At the end of the day, please pick-up all trash and personal belongings, if you don't, check with the Recreation Office for lost and found items.
5. Be considerate of others, including the bus driver, supervisor, teacher, and other participants. Please do not use loud shouting, loud music or vulgar language.
6. If your bus has video capabilities, only "G" rated movies may be shown.

REFUND POLICY

A full refund, minus 15% service fee, is available up to December 27th. After that date, no refund will be available. There are no make-up classes. Registration is non-transferable.

If The program is cancelled due to a road closure, a make up date will be scheduled for the entire group.

American Fork Recreation Ski Bus 2020

Registration Form

Participant's Name _____ Age _____ Birth Date _____

Home Address _____ City _____

Grade _____ School _____ Email _____

Parent's Name _____ Phone _____ Cell _____

Family Physician _____ City _____ Phone _____

If we are unable to reach the parents in case of an accident,

Please notify _____ Phone _____

WAIVER FOR PARTICIPANT BY PARENT

In consideration of your accepting my child's participation in the Ski Lesson program, I hereby, for myself, my child who is a juvenile, and our heirs, do waive and release any and all rights and claims for damages I or my child have against the City of American Fork or its representatives, for any and all injuries suffered by myself, my child or any member of my family, going to, coming from, or while at any American Fork sponsored skiing lesson, event or related activity for ordinary negligence. I acknowledge that skiing is a physically active sport that has some inherent risks to the participants. It is conducted on semi-hard and slippery surfaces with other individuals whose actions cannot always be controlled or predicted. Possible injuries associated with skiing include, but are not limited to: leg/ arm breaks, wrist/ ankle sprains, ligament/ cartilage tears, concussions, eye injuries (scratch, gouge or loss), or even death. I hereby certify that I have read this waiver and recognize that there are risks involved in the sport of skiing. As the parent/ guardian of _____ I assume those risks. I understand and acknowledge that American Fork does not provide accident and medical insurance for the participants in this program. I further state that I, my child and all members of my family are covered by adequate accident and medical insurance.

PARENT'S SIGNATURE _____

Brighton Ski School

1) Which lesson (Check One):

SKI _____ SNOWBOARD _____

2) Number of times participated in the above activity _____

3) Check ONE that best describes the participant:

0 Never Been _____ **1** Comfortable on Greens _____
2 Comfortable on Blues _____ **3** Comfortable on Blacks _____

Office Use Only	
_____ \$240 Ski/Snowboard Package	
Employee _____	Date _____
PMT— Cash / CC / Check # _____	

You must stay with either the skiing or the snowboard lessons you start with, no switching after first lesson!

AGREEMENT TO USE FACILITIES OF BRIGHTON RESORT

IMPORTANT: THIS IS A LEGALLY BINDING AGREEMENT; PLEASE READ IN FULL AND UNDERSTAND BEFORE SIGNING.

You/your minor child (if applicable) may be hurt using the facilities and equipment of Brighton Resort ("Brighton"). If you are unwilling to assume all the risks of you/your minor child's use of the Brighton facility and equipment, **DO NOT** sign this document, in which case you/your minor child will **NOT** be authorized to use the facilities and equipment at Brighton, and you will be refunded any monies you paid to use the facilities and equipment at Brighton. If you sign this document BUT make any alterations to it, you are NOT authorized to use the facilities or equipment at Brighton.

1. **Assumptions of Risks.** I, for myself or as the parent/legal guardian of the participating minor child, whose name is listed below ("Participant") wish to use Brighton and may engage in one or more activities, including without limitation: alpine, nordic, and freestyle skiing; snowboarding (including freestyle jumping); alpine skiing and snowboarding lessons/instruction; snowshoeing; and cross country skiing(collectively, the "Sports"). I understand that the Sports are intensive sports that involve many inherent risks and dangers, and that the facilities and equipment of Brighton or participating in the Sports may put me/my child at risk of serious injury, illness, or even death. These dangers include but are not limited to: use of ski lifts and tows; collision with structures and devices; risk-creating weather conditions and variations in terrain; accidents by other users of Brighton; failure to follow safety procedures; failure to stay within ability or control; improper instruction; and limits or defects at Brighton. I am also aware that hazards may exist throughout Brighton, may be unmarked and occur without warning, and that safety equipment, proficiency checks, supervision and enforcement of rules do not and cannot guarantee my/my minor child's safety. I am/my minor child is able to perform the essential functions required to use the facilities and equipment at Brighton and participate in the Sports and I am/my minor child is freely and voluntarily participating in the Sports and the use of the facilities and equipment at Brighton. **I REPRESENT AND WARRANT THAT I HAVE READ THE UNDERSTOOD THIS DOCUMENTS, AM OF SOUND MINE, HAVE LEGAL AUTHORITY, AND FREELY ACCEPT AND FULLY ASSUME THE RISK THAT I/MY MINOR CHILD CAN SUFFER PROPERTY DAMAGE, ILLNESS, SEVERE PERSONAL INJURY OR EVEN DEATH BY USING THE FACILITIES OR EQUIPMENT AT BRIGHTON OR PARTICIPATING IN THE SPORTS,** not only the ways described above, but also in ways that are unknown and unexpected, even if I follow/my minor child follows instructions or advice.

2. **Consent to Medical Treatment, Consent to Use of Images, Etc.** If I am unable to consent at the time, due to injury, illness or absence, I hereby consent to administration of first aid and other emergency medical treatment for such injury or illness that occurs during my/my minor child's use of the facilities or equipment at Brighton or participation in the Sports. I have/my minor child has adequate health insurance or resources to cover the costs of treatment in case of any such injury or illness. I agree to refrain/cause my minor child to refrain from and not to be impaired by the use of alcohol or any controlled substance (except as medically authorized) while using the facilities or equipment at Brighton or participating in the Sports. I grant to Brighton and its assigns the right to use, reproduce, display, distribute and make derivative works, in any and all media, or my/my minor child's voice and likeness recorded while using the facilities or equipment at Brighton or participating in the Sports and any biographical information furnished by me my minor child to Brighton.

3. **Waiver, Release and Indemnification.** I understand and agree that Brighton is not an insurer of my/my minor child's conduct. TO THE FULLEST EXTENT PERMITTED BY LAW, **I HEREBY RELEASE, WAIVE, COVENANT NOT TO SUE, AND DISCHARGE BRIGHTON, BOYNE USA, AND CNL PROPERTIES, INC. AND ALL OF ITS TRUSTEES, DIRECTORS, MANAGERS, OFFICERS, EMPLOYEES, VOLUNTEERS, AGENTS AND REPRESENTATIVES (COLLECTIVELY, THE "RELEASEES") FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, AND CAUSES OF ACTION WHATSOEVER ARISING OUT OF OR RELATED TO ANY LOSS, DAMAGE, OR INJURY, INCLUDING DEATH, THAT MAY BE SUSTAINED BY ME/MY MINOR CHILD OR LOSS OF DAMAGE TO ANY PROPERTY BELONGING TO ME/MY MINOR CHILD, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE, ARISING OUT OF OR RELATED TO MY/MY MINOR CHILD'S USE OF BRIGHTON OR PARTICIPATION IN THE SPORTS.** I AGREE THAT THIS DOCUMENT SHALL BIND MY GUARDIAN, ASSIGNS, HEIRS, ADMINISTRATORS AND EXECUTORS FOREVER.

In the even any one or more of the provisions contained in the Agreement shall for any reason be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect the validity or any other provision hereof and this Agreement shall be construed as if such invalid, illegal or unenforceability provision were not contained herein.

Name: _____ Date of Birth: _____
FULL NAME OF PARTICIPANT

Signature: _____ Today's Date: _____
SIGNATURE OF PARTICIPANT

Street Address: _____ City: _____ State: _____, Zip: _____ Country: _____
MAILING ADDRESS OF PARTICIPANT (or Parent/Guardian if Participant is younger than 18)

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE NUMBER: _____

Name of School/rec center or group _____

Parent/Guardian MUST sign below IF Participant is younger than 18 <i>Circle how related to Participant: Parent/Guardian</i>
_____ PRINT NAME OF PARENT/GUARDIAN
_____ Date:
_____ SIGNATURE OF PARENT/GUARDIAN