AGREEMENT OF RELEASE AND INDEMNITY	AASC FOR SUMMER SKIS	FASON DATED (VEAR):
NAME OF PARTICIPANT:	TORSONNERSKIS	AGE: PHONE:
NAME OF PARTICIPANT:ADDRESS:	CITY:	STATE: ZIP:
I acknowledge that snowskating, snowblading, ski snowmobiles, snowcats, and related sports activities in Activities") are HAZARDOUS activities and that I hamy child to do so) despite the risks that they present. I BEHALF OF MYSELF AND ANY CHILD ENTRUST after the program, event, or session begins.  I acknowledge that as a Participant in Sports Activate not limited to, the following:  I am the sole judge of the limits of my skills an maintain reasonable control of speed and cours.  I will abide by the directions and instructions of I will familiarize myself with the posted inform reasonably possible before using any slope or to I will not cross the uphill track of any surface lies. I will not overtake any other participant except overtaken Participant.  I will yield to other participants when entering runaway equipment.  I will not board rope tows, wire rope tows, j-bato use the devices, and I will follow any writter.  If involved in an accident, I will not depart from If I am injured (or if my child is injured) I will  I will not embark or disembark from a ski lift et I agree that a violation of any of the duties set for the second control of the second control of the second control of the second control of	ing, snowboarding, racing cluding training for such ve made a voluntary cho ASSUME THE INHER STED TO MY CARE. It ities I have certain duties did ability to meet and over e. If the ski area operator, nation on location and degrail. If except at points clearly in such a manner as to a strail or starting downhites, t-bars, ski lifts or other to reverbal instructions the nor verbal instructions	g, chairlifts, sports event production, sports events, a activities (collectively referred to as "Sports ice to participate in such Sports Activities (or to allow ENT RISKS OF THE SPORTS ACTIVITIES ON understand that no refunds of any fees will be given under Oregon law (ORS 30.985) which include, but recome the inherent risks of Sports Activities and I will gree of difficulty of trails and slopes to the extent of designated by the ski area operator. To do contact and shall grant the right-of-way to the lil. I will wear retention straps or other devices to prevent or similar devices unless or until I have sufficient ability at are given regarding the devices. Ving my name and address if reasonably possible to the ski area operator before leaving the ski area. Or by the authority of the ski area operator.
<ul> <li>snowskating, snowblading, skiing, snowboarding and facilities at the ski area. I also agree that if damages that may result.</li> <li>IN CONSIDERATION OF PARTICIPATING RACE TRAINING, EVENT PRODUCTION, RACE AND UNLOADING), AND/OR SNOWMOBILE COMMOBILE OF TRAINING AND/OR SNOWMOBILE OF TRAINI</li></ul>	ng, boarding or riding ch I violate any of these dut IN SNOWSKATING, S CING, SPORTS EVENT OR SNOWCAT TRANS	airlifts or snowcats, and my right to use the equipment ies, this is evidence of my fault for any injuries or NOWBLADING, SKIING, SNOWBOARDING, IS, CHAIRLIFT USE (INCLUDING LOADING PORTATION, I AGREE TO RELEASE FROM
LIABILITY AND TO INDEMNIFY AND HOLD ACTIVITIES, AND NATIONAL SKI CAMPS LL OFFICERS AND DIRECTORS, OWNERS, EMPLOYEES FROM ANY A ATTORNEY FEES), ARISING OUT OF OR IN A FOR, OR MY PARTICIPATION IN, SPORTS ACEQUIPMENT OF TIMBERLINE SKI AREA. THE RELEASE CLAIMS AND LIABILITIES CAUSE ORGANIZERS AND SPONSORS OF ANY SPOR In the event of any claims or litigation arising out	C, A COLORADO LIM LOYEES, VOLUNTEE IND ALL CLAIMS AN NY WAY CONNECTE CTIVITIES, OR ANY C IS RELEASE AND INI D BY THE NEGLIGEN TS ACTIVITIES OR E	IITED LIABILITY COMPANY, AND THEIR RS, AGENTS, LANDOWNERS, AFFILIATED D LIABILITIES (INCLUDING COSTS AND D WITH MY PREPARATION OR PRACTICE OTHER USE OF THE FACILITIES OR DEMNITY AGREEMENT IS INTENDED TO ICE OF TIMBERLINE SKI AREA AND/OR THE
venue for legal proceeding shall be Clackamas County this Agreement shall continue to be enforceable. This I, the undersigned, have carefully read and under AND INDEMNITY AGREEMENT which may prev	y, Oregon. If any term is Agreement is governed be stood this Agreement an ent me or my estate from	declared to be invalid hereunder, the remaining terms of
PARTICIPANT'S SIGNATURE:		DATE:
	t be signed by parent or l MED PARTICIPANT, I	egal guardian if Participant is under eighteen (18) years HEREBY AGREE TO THE INDEMNITY
PARENT OR GUARDIAN NAME:	(place with	DATE:
	(please print)	

PARENT OR GUARDIAN SIGNATURE: