

Trollhaugen Snowsports School 2018-2019 Registration and Release of Liability:

I, the undersigned participant or parent of the child participant listed, understand that there are risks, dangers, and hazards associated with the sport of skiing in its various forms, including snowboarding, that may cause serious personal injury or death and that injuries are a common and ordinary occurrence in this sport and in this snowsports school, which includes but is not limited to, general lessons, “troll” youth programs, explorer corps program, pre-school ski school, and women’s training programs.. In consideration of my or my child’s participation in classes, instruction and/or lessons by the Ski School and use of Trollhaugen’s facilities, **I RELEASE AND FULLY DISCHARGE Trollhaugen, Inc., its owners, officers, shareholders, instructors, agents, and employees (collectively the “TROLLHAUGEN RELEASEES”)** from any liability resulting from any personal injury to myself or child participant which is caused by any **NEGLIGENT ACT OR OMISSION of any TROLLHAUGEN RELEASEE with respect to:**

- the preparation, organization, coordination, operation or supervision of the Snowsports School;
- the classes, instructions or lessons given or not given to my child;
- the design, location, construction, inspection, classification and maintenance of ski trails, ski runs and slopes, including their grooming and modifications to their natural steepness and pitch, used at Trollhaugen in its classes, instructions and lessons;
- the padding or non-padding of natural and manmade obstacles or hazards on, adjacent to, or off the skiable terrain;
- the construction of or non-construction of fences, rope lines, or other barriers, including the selection of the construction materials;
- the presence of snowmaking pipes, hydrants, guns, wands, and other snowmaking equipment, poles, rocks and trees adjacent to the ski runs; and
- the loading, riding, and unloading of chairlifts, including the presence or absence of restraint bars, and the loading, riding, and unloading of surface lifts.

I accept full responsibility for any personal injury which may result from my or my child’s participation in the Ski School and its classes, instructions, and lessons, and I hereby **HOLD HARMLESS** the TROLLHAUGEN RELEASEES from any personal injury sustained by myself or my child participant, including death, caused by the negligence of any TROLLHAUGEN RELEASEE, while participating in the Ski School. **I agree not to bring any action or lawsuit against any TROLLHAUGEN RELEASEE for any personal injury caused by the NEGLIGENCE of any TROLLHAUGEN RELEASEE.**

In accordance with Wisconsin law, nothing in this Release of Liability should be construed as releasing, discharging or waiving any claims I may have for reckless or intentional acts on the part of any TROLLHAUGEN RELEASEE.

I understand that for a fee of \$20.00/lesson in addition to the normal ski school fee, Trollhaugen offers a Ski School Agreement without the signing of a release of liability. In signing this Release of Liability, I acknowledge I am aware of this option offered by Trollhaugen and hereby waive my right to purchase said option.

As a parent and/or legal guardian of the below-named minor participant, I hereby give permission for my child or ward to participate in classes, instructions and/or lessons by the Ski School. I have read and understand the above **TROLLHAUGEN SNOWSPORTS SCHOOL REGISTRATION AND RELEASE OF LIABILITY** and, on my behalf and on behalf of my child or ward, I agree to all terms contained therein. I represent I have full authority to sign on behalf of my child or ward, realizing this Release of Liability is binding upon my child or ward as well as myself. **I, on behalf of myself and my child or ward, agree not to bring any action or lawsuit against TROLLHAUGEN, Inc., its owners, officers, shareholders, instructors, agents or employees for any personal injury suffered by my child or ward or myself, caused by the NEGLIGENCE of any TROLLHAUGEN RELEASEE.**

CAUTION: READ BEFORE SIGNING!

THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND WILL BAR YOUR RIGHT TO SUE!

Participant’s Name (Print): _____ Age: _____ Date of Birth (if under 19): _____

Address: _____ City: _____ State: _____ Zip Code: _____

Any health issues/allergies we should be aware of? Explain: _____ Emergency phone # today: _____

Level (beginner, intermediate, advanced?): _____ Lessons previously? Y / N (circle one)

Parent’s or Legal Guardian’s Signature: _____ Date: _____