

# HALF BOULDER 2018 Registration Form

PLEASE PRINT CLEARLY! PLEASE PRINT CLEARLY! PLEASE PRINT CLEARLY!

Name:	M	F	DOB:	(mm/dd/yyyy)
Mailing Address:				
City:	State:		Zip:	
Phone:	Email:			
(REQUIRED) Emergency Name:			Emergency Phone:	

## For Combo Entry: (Adult + Child 10 & under)

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

### Adult Entry Fee

August 1, 2017 - January 31, 2018, 9pm: \$75.00

### Age 17 & Under

August 1, 2017 - January 31, 2018, 9pm: \$45.00

### Adult / Child (10 & under) Combo:

August 1, 2017 - January 31, 2018, 9pm: \$85.00

**Check or Money Order Payable to:**

**Boulder Mountain Tour Ltd.**

**PO Box 5868**

**Ketchum, ID 83340**

**TOTAL AMOUNT ENCLOSED: \$ \_\_\_\_\_**

**All skiers in the Half Boulder will start in a single wave from the Baker Creek Start area.**

## ACKNOWLEDGEMENT OF RISK, ASSUMPTION OF RISK AND RELEASE OF LIABILITY

**PLEASE READ CAREFULLY BEFORE SIGNING**

I, or if signing for a minor, as a parent or legal guardian on my behalf and the minor's behalf (individually and collectively both the minor and I referred to as "I" and "me"), understand that the BOULDER MOUNTAIN TOUR (referred to as the "Event") involves the possibility of personal injury and property damage. The Event includes the ski race itself, and also anything arising out of or related to the race, such as, race packet pick-up, transportation to the start and from the finish and awards ceremony, whether or not on race day. I understand there may be obvious hazards or hazards that are not obvious with respect to the Event, and that those hazards may include, but are not limited to, hazards associated with weather, snow conditions, use of Galena Lodge facilities and trails, and natural and man-made hazards on the race course itself. I freely choose to participate AS A PARTICIPANT in the Event and completely assume all risk. In consideration of being allowed to participate in this Event, I release, waive, discharge from any and all liability, indemnify and hold harmless from any and all claims (the "release") BOULDER MOUNTAIN TOUR LTD., and all political subdivisions of the United States, State of Idaho or Blaine County (all individuals or entities being released/indemnified) involved with or in the Event, and all those entities officers, directors, employees, volunteers and agents or representatives of any kind (collectively all the above released parties referred to as "Released Parties"). The term "claims" shall include, but not be limited to any and all attorney fees, awards, causes of action, claims, contracts, costs, damages, demands, expenses, injuries, losses, liabilities, litigation, judgments, obligations, recoveries and/or rights, whether for personal injury or property damage, known or unknown, contingent or noncontingent, liquidated or unliquidated, asserted or which may be asserted by me, by my family or a third party for personal injury or property damage to me or others arising out of or related to this Event or any participation in this Event. I also agree that Released Parties shall have the right to take, use, publish and reproduce any digital recordings of me.

I sign this release of my own free will. This release shall bind me, my family, heirs, personal representatives, successors, trustees and assigns. This release shall be interpreted neutrally and ambiguities, if any, shall not be construed against the Released Parties. If any term of this release is determined to be invalid for any reason, all other terms shall remain in full force and effect. This release shall only be modified in writing, signed by Released Parties and no statements or course of conduct shall modify it. I am aware that I am releasing certain legal rights for me and others. I have carefully read and fully understand the above content.

Signature of Adult Participant: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### If a MINOR, BOTH PARENTS MUST SIGN FOR AN EFFECTIVE ENTRY:

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Printed Name: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Printed Name: \_\_\_\_\_