

## 2018-2019 KANSAS CITY SKI CLUB TRIP APPLICATION

PLEASE COMPLETE IN FULL & SIGN

Sequence Number \_\_\_\_\_ (assigned by Trip Captain)

Trip Name \_\_\_\_\_

Today's Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ Membership Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Cell \_\_\_\_\_ Work \_\_\_\_\_ Home \_\_\_\_\_

E-mail (Please PRINT) \_\_\_\_\_

I want to room with \_\_\_\_\_ I am: Male Female Age (if under 21) \_\_\_\_\_

- **Bus Trips: Standard Shared Bunk Private Bunk (extra fee) Fly/Drive (if available)**
- **Fly/Drive ONLY (if available): Early arrival-option—purchase 1 night lodging for an additional fee due at sign up. yes /no**

- **If for a Fly Trip Please Provide Full Name As On Drivers License and Date of Birth Below**

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- **Name \_\_\_\_\_ DOB \_\_\_\_\_**

**Deposit:** Enclose a check of \$ \_\_\_\_\_ payable to the Kansas City Ski Club **or** visit [kcsclub.org](http://kcsclub.org) to pay by credit card.

Forfeiture of \$30.00 (bus trips) or \$100.00 (air trips), **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-Laws and Trip Regulations of KCSC.

I understand that participation in KCSC is voluntary and that there are risks and dangers involved, and I hereby assume 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 and participating in this trip voluntarily.

\_\_\_\_\_  
Date Member Signature or Parent Signature for Minor

\_\_\_\_\_  
Date Signature of Junior Member Age 16 or Over (in Addition to Parent Above)

Have you traveled with the KCSC? Yes No

### EMERGENCY CONTACT (please list a contact who is not on the trip)

Name \_\_\_\_\_ Relation \_\_\_\_\_

Phone: Cell \_\_\_\_\_ Work \_\_\_\_\_ Home \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_