



Participant’s Info

Last NameFirst NameGenderBirthday MM/DD/YYYYAge on Dec. 31, 2019

AddressCityProvincePostal Code

Parent’s info Mandatory for participants under 18 years of age

1. Parent/Guardian First and Last NameE-mail addressCell PhoneHome PhoneWork Phone

2. Parent/Guardian First and Last NameE-mail addressCell PhoneHome PhoneWork Phone

Emergency contact information (during program hours)

First and last nameRelationshipCell PhoneHome PhoneWork Phone

Health information

Does your child have any medical problems (such as heart, vision, asthma, hearing, allergies, depression, anxiety. etc.)?
☐ Yes ☐ No
If Yes, please explain:

Does your child/you have any allergies?
☐ Yes ☐ No
If Yes, please explain:

Ski info

Level of skiing experience:

Please select the appropriate Ski Package

Ski package includes lessons and ski pass	Register Before Nov. 15, 2019	Register from Nov. 16, 2019
Beginners 9 hours	<input type="checkbox"/> \$650	<input type="checkbox"/> \$700
Experienced; Novice, Intermediate, Advanced 12 hours	<input type="checkbox"/> \$710	<input type="checkbox"/> \$760
Recreational skiing for parents Ski Pass only	<input type="checkbox"/> \$215	<input type="checkbox"/> \$215

Select preferred method of payment:

Plus 13% HST
* Additional 3% processing fee will be added when using a PayPal option.
Upon receiving your application, we will send you an invoice and instructions for your preferred method of payment. All fees are non-refundable.

Please Note:

- 1. All participants must follow instructions and ski safety rules. Disobeying participant will be removed from the lessons without refund.
- 2. Upon the ending of the lesson in the “Junak” Ski School, participants become the parent’s responsibility.
- 3. Ski School “Junak” will conduct lessons in all weather conditions (cold, snow, wind, rain, etc...)
- 4. All fees are final.
- 5. The “Talent YAD” Ski School will make refund only if: A) The “Junak” Ski School cancels lessons; B) The ski center closes its operation.

Photo release

☐ Yes I give permission to Talent YAD to include my child in photos taken by program staff, and/or occasional DVD taken by local media. I understand these photos may be used for promotional purposes (e.g. slide show, website photo gallery, brochures, camp fair display, etc), but no names will be used.

☐ No If you do not wish your child to be included in any photos, please understand that your child is fully aware that he/she must exclude themselves from any/all individual/group photos.

There is a risk of injury involved in training and participation in any sport. Talent YAD will make every effort to create safe and controlled environment. In an unlikely event that an injury to my child occurs arising from participation in the program activities, I hereby release all employees, instructors and Director from any and all claims. I give program officials the right to act on my behalf in case of an emergency.

BY ELECTRONICALLY SIGNING THIS APPLICATION AND TYPING MY NAME BELOW, I CERTIFY THAT INFORMATION I PROVIDE IN THIS APPLICATION IS CORRECT AND THAT I UNDERSTAND AND AGREE TO ITS TERMS AND CONDITIONS.

Parent/Guardian's nameDate MM/DD/YYYY



TALENT
YOUNG ATHLETE DEVELOPMENT

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the Talent Young Athlete Development o/b HHTP.Inc athletic/sports program, ski school, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Talent Young Athlete Development o/b HHTP.Inc, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

BY ELECTRONICALLY SIGNING THIS WAIVER AND TYPING MY NAME BELOW I CERTIFY THAT I UNDERSTAND AND AGREE TO ITS TERMS AND CONDITIONS.

PARENT/GUARDIAN'S NAME

PARTICIPANT'S NAME

Date MM/DD/YYYY

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.