



2009-2010 Season

Dear Sun Valley Master Skiers:

Welcome to the Sun Valley SnowSports School 2009/2010 season. We're looking forward to another great winter! We invite you to join us in our exclusive programs.

***Mountain Masters***  
***Our all-mountain clinic for intermediate to expert skiers.***

Open to intermediate and expert skiers. The Mountain Masters program is designed to improve skiing skills in all terrain and conditions, in a fun and sociable atmosphere. Clinics meet at Lookout Restaurant on top of Baldy Monday - Friday, 9:30 a.m. - 12:30 p.m. Whenever possible, group size will be limited to nine skiers.

**Registration forms are available at the SnowSports School Office located on the Sun Valley Mall and all mountain lodge desks. You can also print registration forms from our website at [www.sunvalley.com](http://www.sunvalley.com). Mail or fax your completed application to: Sun Valley Ski & Snowboard School, PO Box 10, Sun Valley, ID. 83353. Fax 208-622-2238. The SnowSports School Office is open weekdays, 8 am – 5 pm; closed Saturday & Sunday. Please call (208) 622-2289 for further information.**

**The Main Event!**      The 2009/2010 Mountain Masters Season. Nine great      **Cost \$ 1,350.00**  
Weeks! New coaches every week.  
Monday, January 4 through Friday, March 12, 2010  
**\*\*Price includes "End of Season" Banquet\*\***

Get ready for an exciting trip to Snowbasin!  
(Times, dates, and prices to be announced at a later date.)

**Groups do not meet President's Week, February 15 - 19, 2010**

**Injury Refund Policy:** Charge will be prorated to \$80.00 per day from the beginning of the program.





Last Name \_\_\_\_\_ Date \_\_\_\_\_

**REGISTRATION FORM & PARTICIPATION AGREEMENT  
SUN VALLEY SNOWSPORTS SCHOOL**

*P.O. Box 10 • Sun Valley, Idaho 83353 • Ring 208.622.2289 • Fax 208.622.2238  
Office Hours – Weekdays 8:00 AM to 5:00 PM*

**Mountain Masters**

\_\_\_\_\_  
*Participant LAST Name*

\_\_\_\_\_  
*Participant FIRST Name*

\_\_\_\_\_  
*Mailing Address*

\_\_\_\_\_  
*City, State, Zip Code*

\_\_\_\_\_  
*Local Lodging*

\_\_\_\_\_  
*Room #*

\_\_\_\_\_  
*Arrival Date*

\_\_\_\_\_  
*Home Phone*

\_\_\_\_\_  
*Cell Phone*

\_\_\_\_\_  
*Email Address*

I, the participant, to the fullest extent allowed by law, agree to fully release, indemnify, hold harmless, and to not sue **Sun Valley Company** and its parent, subsidiary, brother, sister, and other closely-related affiliate companies, and its and their officers, directors, employees, agents, successors, and assigns for any injuries or damages received while skiing, snowboarding, riding lifts, or using the ski area and/or its facilities (hereafter “skiing”), even if occurring as a result of the negligence of Sun Valley Company. I assume all of the risks of skiing including injuries or death. I agree to obey and follow all instructions and signs, ski within my ability and under control at all times, watch for changing weather, and observe and avoid all marked and unmarked hazards. I certify that I am physically fit and able to participate with or without reasonable accommodation. In the event of an injurious incident while attending SnowSports School, I give the Sun Valley Ski Patrol permission to secure medical assistance for me as it sees fit at my expense and responsibility. This release shall not apply to any “public duties” owed by **Sun Valley Company**. If any portion of this agreement is found to be unenforceable, all other parts shall remain in effect.

Persons under the age of 18 (minors) are required to have a parent, guardian or a responsible authorized adult (collectively referred to herein as “Authorized Adult”) read and sign this Agreement. To the fullest extent allowed by law, the Authorized Adult individually and on behalf of the minor(s) has read, understands, and expressly agrees to all of the terms of this agreement. The Authorized Adult agrees to pay all medical bills incurred by the minor(s) and waives all rights of subrogation.

**I HAVE READ, UNDERSTOOD, AND VOLUNTARILY SIGNED THIS RELEASE AND INDEMNITY AGREEMENT.**

\_\_\_\_\_  
*Signature of Participant or Authorized Adult if Participant is a Minor*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*If Signing for a Minor, PRINT First & Last Name*

\_\_\_\_\_  
*Phone*