



Leavenworth Winter Sports Club

2018-2019 Season Pass Rates | In-Season

Pass Type	Description of Pass Type	In-Season Rates From Nov 1, 2018	DUE TO LWSC Rates with WA Sales Tax
Individual	18-69 years	\$210.00	\$227.22
Family	2 Adults and dependents that qualify under the IRS status, must be of age 22 years or under as of Dec. 31, 2018	\$415.00	\$449.03
Youth Individual	6-17 years (Non-skiing parents)	\$80.00	\$86.56
Senior	70-74 years	\$80.00	\$86.56
Super Senior	75 years and older	\$30.00	\$32.46
Business	Transferable Season Pass good at all ski venues / all times	\$500.00	\$541.00
Lifetime Gold	This is a limited offer for any Individual that wants the ultimate freedom of skiing all venues anytime for a lifetime.	\$3,000.00	\$3,246.00
Lifetime Family	This is a limited offer for a Family that wants the ultimate freedom of skiing. Good for 2 Adults and their Dependents until age 22.	\$5,000.00	\$5,410.00
Supporting Membership (Not a Season Pass)	This is a new LWSC Membership available without the purchase of a season pass. The Supporting Membership is a great way to help support the activities and operations of the Club.	\$50.00	\$54.10

(WSST: 8.2%)

Season Pass Holder(s) Information

Email address to receive news about the Club _____

Primary Name on Pass _____ DOB ___/___/___ Total Pass Amount \$ _____

Spouse _____ DOB ___/___/___ Phone Number _____

Mailing Address _____ City/State/Zip _____

To be included in the Family purchase; all Family members must qualify as an IRS dependent status and be the age of 22 years or under as of Dec. 31, 2017.

Please list the Name and Date of Birth of each Dependent

Dependent _____ DOB ___/___/___ Dependent _____ DOB ___/___/___

Dependent _____ DOB ___/___/___ Dependent _____ DOB ___/___/___

Please list any additional dependents on an additional form

SIGNATURES REQUIRED ON THE BACK OF THIS PAGE.

**Return to: Leavenworth Winter Sports Club
PO Box 573
Leavenworth, WA 98826**

Payment Information

Season Pass Type(s) _____ Total Season Pass Purchase \$ _____

MasterCard / Visa / Discover _____ **OR** Check Enclosed _____ Three Digit Security Code _____
(From the back of the card)

Card Number _____ Expiration Date _____

Signature _____



This agreement must be completed in full, signed and dated before use of LWSC facilities with season pass.

Leavenworth Winter Sports Club (LWSC)
RELEASE OF LIABILITY, WAIVER OF CLAIMS, ACKNOWLEDGMENT OF RULES,
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT
PLEASE READ CAREFULLY!

This document applies to all LWSC activities, including but not limited to alpine skiing, Nordic skiing, snowshoeing, tubing, snowboard, ski jumping, races and special events.

The undersigned season pass holder(s) agree as follows:

- 1) I understand and agree that winter snow sports activities have inherent risks...
2) I have read, understand, agree with, and will obey Your Responsibility Code...
3) I hereby agree to grant permission to the LWSC to utilize the pass holders image...
4) I hereby RELEASE, HOLD HARMLESS AND INDEMNIFY THE LEAVENWORTH WINTER SPORTS CLUB...
5) This is a binding contract that is intended to provide a comprehensive release of liability...

Membership Rules and Policy:

- 1) All season passes are non-transferable and non-refundable. There will be absolutely no refunds...
2) Season Pass Holders must display their season pass at all times when using LWSC facilities.
3) Lost or stolen passes must be reported to a ticket booth as soon as possible.
4) The LWSC reserves the right to change its tentative open/close dates and operating hours...
5) The LWSC reserves the right to cancel a season pass for failure to comply with regulations...

I have read and agree to comply with the above Liability Release and Season Pass Rules and Policy. I am aware that this is a Release of Liability and a contract between myself and the LWSC and I sign it of my own free will.

Signature(s) of all pass holders:

1) _____ Date _____
2) _____ Date _____
3) _____ Date _____ Child's Age __
4) _____ Date _____ Child's Age __
5) _____ Date _____ Child's Age __

If I am signing on behalf of a minor (18 and under), I accept full responsibility and RELEASE, HOLD HARMLESS and INDEMNIFY the LWSC, its directors, subsidiaries, officers, employees, volunteers and agents from all claims and medical expenses incurred as a result of the use of this season pass and LWSC facilities.

Signature of parent or guardian:

_____ Date _____

PLEASE LEAVE THIS SPACE BLANK