

# SKI TEAM – CONTACT FORM & MEDICAL INFORMATION



Please provide the following information for your child. You (the parent or guardian) are responsible for providing the Leavenworth Winter Sports Club with the medical information on this document along with a Liability Release and Concussion Form for each child you have in our alpine or Nordic programs.

Printed Name Parent/Guardian (1)	Printed Name Parent/Guardian (2)	Date	
<hr/>			
Signature Parent/Guardian (1)	Signature Parent/Guardian (2)		
<hr/>			
Skier Name	M	F	X
<hr/>			
Address			
<hr/>			
City	State	Zip	
<hr/>			
Email 1	Email 2		
<hr/>			
Phone (Home)	Phone (Cell)		
<hr/>			

## EMERGENCY INFORMATION

Skier Name	<hr/>		
Birthdate	Grade	<hr/>	
Allergies	<hr/>		
Medications	Other Info	<hr/>	
Physician	Phone	<hr/>	
Medical Insurance	Policy Number	<hr/>	

## CONSENT FOR TREATMENT

I, the parent or legal guardian of the above-named minor, in the event of injury to my child while in the care of the Leavenworth Winter Sports Club, do hereby give my permission to seek medical attention for him/her and further, I approve his/her being transported to a clinic or hospital for the purpose of having authorized licensed medical personnel treat such injury.

Printed Name Parent/Guardian (1)	Printed Name Parent/Guardian (2)	Date
<hr/>		
Signature Parent/Guardian (1)	Signature Parent/Guardian (2)	

The Leavenworth Winter Sports Club is a non-profit organization operating for the benefit of its members and the community. The Ski Programs are subsidized by the LWSC and funds for this program come directly out of the yearly operating budget.



# LWSC SKI TEAM WAIVER & RELEASE OF LIABILITY FORM

In consideration of being allowed to participate in the LWSC Alpine or Nordic Ski Teams, sponsored by the Leavenworth Winter Sports Club (LWSC), and on behalf of my heirs, assigns, personal representatives and next of kin, the undersigned:

1. Acknowledge and fully understand that I and/or the minor participant will be engaging in ski competition activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses that might result from not only my actions, the inactions or negligence of others, the rules of competition, the condition of the premises or any equipment used. Further, that there may be other risks not known to me or not reasonably foreseeable at this time.

2. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.

3. I hereby **RELEASE, HOLD HARMLESS AND INDEMNIFY THE LEAVENWORTH WINTER SPORTS CLUB AND LEAVENWORTH SKI TEAM, ITS DIRECTORS, SUBSIDIARIES, OFFICERS, EMPLOYEES, COACHES, VOLUNTEERS AND AGENTS** from any and all claims, damages and medical expenses arising out of or in connection with participation in practices or events and the use of LWSC facilities, including but not limited to claims alleging negligence.

4. This is a binding contract that is intended to provide a comprehensive release of liability, but it is not intended to assert any defenses that are prohibited by law. If any part of this contract is deemed unenforceable, all other parts shall be given the full force and effect.

**I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE NOT CHANGED IT ORALLY AND SIGN IT VOLUNTARILY.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

### FOR PARTICIPANTS OF MINORITY AGE

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 the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, including failure on the part of the Releasees to take reasonable steps to safeguard or protect me from the risks, dangers and hazards of skiing competition. **EVEN IF ARISING FROM THEIR NEGLIGENCE.**

Parent or Guardian's Signature \_\_\_\_\_

**If user under 18, parent or guardian must sign**

Athlete's Name \_\_\_\_\_