



2010 Freestyle Junior Olympics

Waterville Valley, NH
March 8 – 14, 2010



ATHLETE RELEASE OF LIABILITY FORM

Please Print Clearly

Athlete Last Name: _____ First Name: _____

Gender: _____ Year of Birth: _____ USSA #: _____

Athlete's State Ski Association: _____ Athlete's Ski Team: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

Emergency Contact: _____ Emergency Phone: _____

____ I have completed have followed all registration instructions for the Freestyle Junior Olympics as outlined in the USSA Freestyle Competition Guide and noted on the Official Junior Olympics website, www.freestylejo2010.org.

____ I have registered online.

____ I will mail the following forms to Marissa Preston, JO Event Manager, PO Box 876, Campton, NH 03223 no later than March 1, 2010:

- Athlete Release of Liability Form signed by parent**
- Waterville Valley Ski Resort Waiver signed by parent**-please note that the ski area is unable to activate the athlete's lift ticket credential until the original of this signed document is returned to WVBBS

The undersigned parents or legal guardians of the above named athlete ("Athlete") and the Athlete (collectively, the "Undersigned"), agree to WAIVE AND RELEASE ANY AND ALL PRESENT AND FUTURE CLAIMS, against the BBTS Ski Club, Waterville Valley Academy, Waterville Valley Black and Blue Trail Smashers Ski Educational Foundation, Waterville Valley Ski Area, Ltd. and their respective agents, employees, coaches, directors, officers, owners and volunteers, due to any cause whatsoever associated with Athlete while participating in Freestyle Junior Olympics in Waterville Valley.

The Undersigned hereby grants Waterville Valley Black and Blue Trail Smashers Ski Educational Foundation d/b/a Waterville Valley Academy and BBTS Ski Club, the right to obtain and/or use Athlete's photograph, digitized image, video and/or voice recording for marketing, public relations, educational and information purposes.

Signature of Mother or Legal Guardian

Signature of Father or Legal Guardian

Signature of Athlete

Printed Name

Printed Name

Printed Name

Date

Date

Date



Waterville Valley Black and Blue Trail Smashers Ski Educational Foundation

Waterville Valley Academy □ BBTS Ski Club
www.wvbbs.org ♦ 603-236-4246

