



Questions? Call: 208.255.3081

### Schweitzer Summer Camp Registration Form

(Space is limited and subject to availability)

Mail form to: Activity Center  
Schweitzer Mountain  
10,000 Schweitzer Mtn Rd  
Sandpoint, ID 83864

Or fax to: 208.263.0775

Camper Name \_\_\_\_\_ Age on July 1 \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

E Mail \_\_\_\_\_

#### I Want To Register For:

**Each session \$150**

\_\_\_\_\_ Session 1: July 6 through July 10

\_\_\_\_\_ Session 2: July 13 through July 17

\_\_\_\_\_ Session 3: July 20 through July 24

\_\_\_\_\_ Session 4: July 27 through July 31

\_\_\_\_\_ Session 5: August 3 through August 7

\_\_\_\_\_ Session 6: August 10 through August 14

\_\_\_\_\_ Session 7: August 17 through August 21

Season Pass Discount \_\_\_\_\_ (\$-10/wk)

Total Due \$ \_\_\_\_\_

Check enclosed: \_\_\_\_\_

Credit card payment: Card Number \_\_\_\_\_

Name on Card \_\_\_\_\_ Exp date \_\_\_\_\_

Signature of cardholder \_\_\_\_\_

Each week will be tailored to suit the wants and needs of each camper. Tell us what your favorite things are:

- Crafts
- Outside Lawn games
- Indoor Games
- Water balloons
- Swimming
- Getting messy
- Staying clean

- Food Games
- Cooking
- Hiking
- Scavenger Hunts

Other Thoughts: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I understand that my child will be transported to camp from the Park and Ride at the base of the mountain. I know that drop off time is 8am and pick up time is 4pm.

**Registration is not complete without payment and completion of reverse side**

## Parents – Please Complete This Registration Form

Are there any medical problems or ALLERGIES we should be aware of?

Please list any medications that need to be taken while at camp.

Any physical or emotional difficulties we should be aware of?

Is there anything else we should know about?

Phone number during the day where you can be reached in case of emergency: \_\_\_\_\_

Alternate emergency contact name: \_\_\_\_\_ Phone number: \_\_\_\_\_

I understand that my child will be participating in a variety of outdoor activities which may include hiking, volleyball, swimming, the climbing wall, chairlift rides, bungee trampoline, lawn games and others. I understand that there are inherent risks in these activities and I give my permission for my child to participate in Schweitzer Camp. I understand that these are High Active Sport activities and that persons who have bad backs, necks, shoulders, broken bones, heart or lung problems, pregnancy or other conditions should not participate in these activities. I understand my child may ride the lift, with another adult other than the camp supervisor. I also agree to HOLD HARMLESS AND INDEMNIFY Schweitzer Adventure Camp and Schweitzer for any claims brought by or on behalf of the minor.

I recognize that mountain activities in camp are hazardous sports that can result in serious injury or death. I accept the risks inherent camp, and in the ski area/mountain environment. I agree to RELEASE, HOLD HARMLESS, AND INDEMNIFY SCHWEITZER MOUNTAIN LLC, SCHWEITZER MOUNTAIN FACILITIES LLC, SCHWEITZER MOUNTAIN SKI OPERATIONS LLC, SCHWEITZER MOUNTAIN REAL ESTATE LLD, (“SCHWEITZER”), AND ITS OWNERS, AFFILIATES, AGENTS AND EMPLOYEES from all claims for any cause, including negligence, which arises out of participation in camp and all related activities; including, but not limited to, Schweitzer Adventure Camp and travel to and from Schweitzer Mountain, or travel to and from Schweitzer Adventure Camp. This release is binding as to any other persons, including family members, heirs and executors.

I acknowledge that participating in the CLIMBING WALL AND COMBO POWER JUMP Trampoline (“COMBO”) are High Active Sport activities and that persons who have bad backs, necks, shoulders, broken bones, heart or lung problems, pregnancy or other conditions should not participate in this activity. Jumpers should be in good health and should not be under the influence of drugs or alcohol while participating. I have made a voluntary choice to participate in those activities despite the risks that they present. In consideration of my being permitted to participate in the “COMBO”, I agree to ASSUME ANY AND ALL RISKS OF INJURY OR DEATH which might be associated with or result from by participation in this event.

If I am signing on behalf of a minor, I accept full responsibility for all medical expenses incurred as a result of the minor’s participation in camp and all related activities, including Schweitzer Adventure Camp programs and/or travel to and from Schweitzer Mountain. In case of an emergency if I cannot be reached, Schweitzer has my permission to obtain any medical and/or First Aid treatment necessary for my child, and I agree to be financially responsible for any medical services deemed necessary.

I hereby grant Schweitzer Mountain Resort, their legal representatives and assigns (including any agency, client, or publication) irrevocable permission to publish photographs of my child. These images may be published in any way, including websites, newsletters, advertising, periodicals and publications of any sort. Furthermore, I will hold harmless Schweitzer Mountain Resort, their representatives and assigns from any liability, by virtues of any blurring, distortion or alteration that may occur in producing the finished product, unless it can be proven that such blurring, distortion or alteration was done with malicious intent toward myself or my child.

This release is intended to be a comprehensive Release of Liability to the fullest extent allowed by the law.

Printed Child’s Name \_\_\_\_\_

Printed Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

