



2017-2018 Hold Harmless and Indemnity Agreement

For and in consideration of the provision of ski racing instruction and training by U.S. Ski & Snowboard Northern Division, or Western Region, I _____ (“athlete”), and if athlete is under the age of 18 years, the parents or legal guardians of athlete, do hereby covenant and agree on behalf of ourselves, to hold harmless, release, defend, and indemnify U.S. Ski & Snowboard, Northern Division and Western Region and any of its employees, or volunteer workers of and from any and all claims arising from athlete’s participation in U.S. Ski & Snowboard Northern Division/Western Region events, including, but not limited to racing instruction, racing competition, or traveling to and from races or training camps. We specifically represent that we have read and have understood that this release is intended to serve as a general release of all legal claims against U.S. Ski & Snowboard, Northern Division/Western Region, is to be construed as broadly as possible in favor of U.S. Ski & Snowboard, Northern Division/Western Region and releases U.S. Ski & Snowboard/Northern Division/Western Region from all claims, including, but not limited to, those arising from the negligence of U.S. Ski & Snowboard/Northern Division/Western Region itself.

Athlete Signature _____ Date _____

If athlete is under the age of 18 years, a parent or legal guardian’s signature must be affixed here:

Parent or Guardian Signature _____ Date _____

USSA Insurance Policy

FIS and U.S. Ski & Snowboard rules require that competitors be covered by valid and sufficient accident insurance. The racer must carry proof of this insurance and have it available at each race or camp so that prompt medical care can be obtained, if ever needed.

Agreement

We have read and understood the Insurance Policy statement. The insurance policy listed on the Medical Release meets the requirements of the U.S. Ski & Snowboard Insurance Policy and will be maintained in force while the competitor is involved in a U.S. Ski & Snowboard, Northern/Western Region camp or team or while participating in any event on a U.S. Ski & Snowboard quota. We agree that we are responsible for any and all medical charges and we agree that we will properly reimburse U.S. Ski & snowboard/Northern/Western Region for any expenses that they incur on behalf of the competitor.

Athlete Signature _____ Date _____

Parent or Guardian Signature _____ Date _____

Please send to: Northern Division U.S. Ski & Snowboard, P.O. Box 217, Whitefish, MT 59937 or Fax to 406.545.2289