



2016-2017 Hold Harmless and Indemnity Agreement

For and in consideration of the provision of ski racing instruction and training by USSA/ 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 USSA, 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 USSA 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 USSA, Northern Division/Western Region, is to be construed as broadly as possible in favor of USSA, Northern Division/Western Region and releases USSA/Northern Division/Western Region from all claims, including, but not limited to, those arising from the negligence of USSA/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 USSA 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 USSA Insurance Policy and will be maintained in force while the competitor is involved in a USSA, Northern/Western Region camp or team or while participating in any event on a USSA quota. We agree that we are responsible for any and all medical charges and we agree that we will properly reimburse USSA/Northern/Western Region for any expenses that they incur on behalf of the competitor.

Athlete Signature _____ Date _____

Parent or Guardian Signature _____ Date _____