

**SUSQUEHANNA SKI & SNOWBOARD CLUB  
OKEMO 2011 WEEKEND TRIP APPLICATION/AGREEMENT  
Trip Dates: Sunday, January 9 – Wednesday, January 12, 2011**

Name \_\_\_\_\_ SSC Member# \_\_\_\_\_ DOB: Mo \_\_\_\_ Day \_\_\_\_ Yr \_\_\_\_  
Print exactly as appears on government-issued photo ID

Gender (M/F) \_\_\_\_ Smoker (Y/N) \_\_\_\_

Name \_\_\_\_\_ SSC Member# \_\_\_\_\_ DOB: Mo \_\_\_\_ Day \_\_\_\_ Yr \_\_\_\_  
Print exactly as appears on government-issued photo ID

Gender (M/F) \_\_\_\_ Smoker (Y/N) \_\_\_\_

Other family travelers \_\_\_\_\_ DOB: Mo \_\_\_\_ Day \_\_\_\_ Yr \_\_\_\_

\_\_\_\_\_ DOB: Mo \_\_\_\_ Day \_\_\_\_ Yr \_\_\_\_

Address \_\_\_\_\_ Ph (H) \_\_\_\_\_ (cell) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

**(All applicants must be current SSC members or have applied for membership)**

**Roommate:** \_\_\_\_\_. **If no roommate is indicated; the trip leader will assign one. Where possible, roommates will be assigned based on same gender, smoking preferences and similar age.**

*The SUSQUEHANNA SKI CLUB reserves the right to make changes including, but not limited to price, time, departure point, dates, lodging, airline flights, etc., where such changes are in the best interest of SSC, or are compelled by circumstances beyond SSC's control. Neither SSC nor its representatives assume any obligation or responsibility for any matters not within their control.*

*I acknowledge that Skiing & Boarding, Ski & Board racing and related activities are hazardous activities and that 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 event named on this form, I agree to assume any and all risks of injury or death which might be associated with or result from my participation in this event*

*I understand that this is a Release of Liability, which will legally prevent me or any other person from filing suit or making any other legal claim for damages against the SUSQUEHANNA SKI CLUB in the event of my death or any injury to me. I nevertheless enter into this agreement freely and voluntarily and agree that it is binding upon me, my heirs, assigns and legal representatives.*

*I agree as an individual or on behalf of family to abide by the provisions and conditions in the trip Agreement and Terms or other trip material, including information appearing in the SSC Chairlift Chatter which information shall be part of the Agreement.*

*I agree to make scheduled payments when due. If I make late payments, make changes or withdraw from the trip, I agree to pay shift, late or cancellation fees as specified in the trip material.*

***I, the undersigned, have read, understand and will abide by all statements, rules and regulations in this Application and the attached\* terms and written material.***

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

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

***Please specify your trip package:***

<u>Trip Package</u>	<u>Cost</u>	<u>Quantity</u>	<u>Total</u>
_____ Trip Package	_____	X ____ persons	= _____
_____ Trip Package	_____	X ____ persons	= _____
Add-ons _____ N/A	_____	X ____ persons	= _____
Deductions _____ N/A	_____	X ____ persons	= _____
<b>Total Cost of Package</b>			_____

I am enclosing check # \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ as a deposit for \_\_\_\_\_ people as listed above.

**Make checks payable to "SSC Okemo 2011".**

**Return form and check to the trip leader: Mark Walter, 1605 Matthew Rd, Camp Hill, PA 17011**

\*Trip terms, payment schedule, cancellation fees, damages, and other important information may be found on the back of this Application.

**SUSQUEHANNA SKI & SNOWBOARD CLUB**  
**OKEMO 2011 WEEKEND TRIP TERMS**  
Trip Dates: Sunday, January 9 – Wednesday, January 12, 2011

**ALL FEES LISTED ARE PER PERSON.**

**STANDARD PACKAGE:** Standard package includes roundtrip motor coach transport, onboard refreshments, 3 nights lodging at Jackson Gore Inn, 3 breakfasts, 3-day lift ticket, and bus driver tips. The third day of skiing will be at Stratton Mountain.

**STANDARD PACKAGE PRICES:** \$545 double occupancy; \$755 single occupancy; \$485 triple occupancy; \$445 quad occupancy

**PACKAGE ADJUSTMENTS:** Package rate for the following ages staying with an adult as a single or double: Children ages 6-12 \$239, ages 13-17 \$249

*Single trip participants signing up for double occupancy will not be guaranteed the double room rates if not applying with a roommate. The trip leader will do everything possible to find an acceptable roommate, however the single occupancy rate will be applied to the final payment if a roommate cannot be found. Cancellation fees will apply.*

**PAYMENT SCHEDULE:** \$200 initial deposit with application  
\$200 second installment by **Tuesday, September 21, 2010**  
Final payment, balance plus any extras, by **Monday, November 15, 2010**

**LATE PAYMENT FEE:** \$20.00 on all payments seven days past due

**CANCELLATIONS:** Cancellations will become valid upon confirmed receipt of a written notice to the trip leader from the participant, or being removed by the trip leader for non-payment.

**CANCELLATION FEES:**

- **Cancellation prior to September 22, 2010 - \$20 fee**
- Cancellation from September 22 through November 15, 2010 - \$120 fee
- NO REFUND for cancellation ON OR AFTER Tuesday, November 16, 2010.

**DAMAGES:** Individuals are responsible for any damages which they may cause to the lodgings and resort facilities, equipment and/or provided transportation.

**OTHER REQUIREMENTS:**

- Reservations cannot be accepted unless deposit is made and trip application and terms agreements are signed.
- All applicants must be current SSC members or have applied for membership.
- If you are travelling with a child or children other than your own, please contact trip leader for *Power of Attorney Form* and *Agreement to Stand In Loco Parentis Form*

**TRAVEL INSURANCE:** Travel insurance is recommended for all trip participants. It is the responsibility of each participant to secure their own insurance based on their individual needs. Contact your trip leader for more info.

**TRIP LEADER CONTACT INFO:** **Mark Walter**  
**1605 Matthew Rd**  
**Camp Hill, PA 17011**  
**717-728-9234**  
**mwalter@skissc.com**

*All trip participants should keep a copy of this application form & trip terms for future reference.*