

# The Friday Night Ski Club

## GUEST PASS & WAIVER FORM

### Directions:

1. Parents must fill out and sign the waiver form below
2. Guest gives this form to an advisor either on the bus or at the Club Help Table upon arrival.
3. Pick up a club guest pass at our Ski Club Help Table.
4. Go to [FNSkiClub.com](http://FNSkiClub.com) and complete the ON-LINE waiver form, if you haven't done so.



CLUB MEMBERS NAME \_\_\_\_\_  
(The name of the club member who is bringing a guest)

DIFFERENT CLUB NAME \_\_\_\_\_  
(For someone just riding the bus from a different ski club.)

GUEST'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

EMERGENCY NAME \_\_\_\_\_  
(Other than for the parent listed above)

EMERGENCY PHONE \_\_\_\_\_  
(For the Emergency Name listed above)

### LIABILITY WAIVER AND EMERGENCY MEDICAL CONSENT FORM:

I understand that skiing can be a dangerous sport and that serious accidents can occur. I realize that Mr. Humphrey and the other adult advisors of the Ski Club are acting as volunteers and as such, I will not hold them, any school they attend, their parish or the Diocese of Cleveland responsible in the event of an accident or injury to my child and waive any and all claims against them. In the event that I can not be contacted if there is an accident or injury, I hereby give my consent for the administration of any treatment deemed necessary by a licensed and practicing Medical Doctor. I hereby give my consent to share any (H.I.P.P.A.) personal medical information for my child with a club advisor. I also give permission for transportation to a hospital or emergency medical facility by ambulance or helicopter if deemed appropriate by the Ski Patrol, Boston Mills /Brandywine, Mr. Humphrey and/or any club advisor.

\_\_\_\_\_  
Parent's Signature

For questions call Frank Humphrey at 440-452-2068 or E-mail questions to [FNSkiClub@AOL.COM](mailto:FNSkiClub@AOL.COM)