Albany Ski Club Trip Registration Form

Sunday River
February 5th TO February 9th 2020
Weekend Trip

Attendee's Number

Name_____
(PRINT EXACTLY AS PRINTED ON GOVERNMENT ID USED FOR TRAVELING)

DOB: MONTH __ __ DAY__ __YEAR __ __ __ __ Address: City _____ State:_____

Email:_____

Cell phone number ( ) ___ ___ ___- ___ ___ ___ ___
Can we use your number on a cell phone trip list ? ☐Y ☐N
Emergency name and phone number

_____

☐ I have a roommate _____ ☐ I need a roommate
Rooms – Double Occupancy (singles available – see pricing) Room preferences not guaranteed
Room Preference : **☐ Standard Hotel Room (2 Queens)**
☐ Studio Deluxe (1 Queen Murphy Bed & One Queen Sofa Bed, Kitchenette)

I have a food allergy: _____

Deposit 1	**$100**	**Registration starts June 1, 2019**
Deposit 2	**$265**	**Due on October 1, 2019**
Deposit 3	**Balance**	**Due on December 1, 2019**

Trip Insurance -Highly recommended !
Trip insurance can be bought thru Ski.com at 6.5 percent or a vendor of your choice.
If interested in trip insurance, contact Diane at 800 525 2052 Ext 3410 to sign up. More information is on the ASC website

I have read the trip policy and understand the policy. By signing this agreement below, I am willing to comply with trip procedures as outlined in the policy. Also, I agree to allow my image to be used for social media and web site publication.

Name _____Date _____

Contact Information
Joan Savage / 13 Durham Ct / Delmar, NY 12054
sundayriver@albanyskiclub.com
****** We need 21 people to sign up by September 15, 2019 to run this trip*********
++
Pricing DO = Double Occupancy SO = Single Occupancy

Option- With IKON Pass	*Price*	*Amount*		*Option – Without IKON Pass*	*Price*	*Amount*
IKON Pass Adult DO	*$ 365*		*X*	*Adult DO*	*$ 610*	
IKON Pass Senior ≥65 DO	*$365*		*X*	*Senior ≥65 DO*	*$ 590*	
IKON Pass Adult SO	*$ 690*		*X*	*Adult SO*	*$ 935*	
IKON Pass Senior ≥65 SO	*$ 690*		*X*	*Senior ≥65 SO*	*$ 915*	
Dining Card	*$ 80*		*X*	*Dining Card*	*$ 80*	
4 Buffett Breakfasts	*$ 72*		*X*	*4 Buffett Breakfasts*	*$ 72*	
			X	*Non Skier DO*	*$ 365*	
Total Amount	*X*	*$*	*X*	*Total Amount*	*X*	*$*

Payments			*Check/Cash*	*Date*		*Amount Remaining*	*Deposited*	*Initials*
First Deposit	*$ 100*							
Second Deposit – October 1								
Final Deposit – December 1								