

**IDAHO SNOW SPORTS ASSOCIATION**  
&  
**Membership Application & Release**

**Medical Consent and Release Form**

The undersigned being the parent or legal guardian of:

USASA # \_\_\_\_\_ (if applicable)      USSA # \_\_\_\_\_ (if applicable)

Athlete Name: \_\_\_\_\_

Address (Street, City, State): \_\_\_\_\_

School: \_\_\_\_\_      DOB: \_\_\_\_\_

Home Phone: \_\_\_\_\_      Email: \_\_\_\_\_

Parent's Cell Phone: \_\_\_\_\_      Skiers Cell Phone: \_\_\_\_\_

a minor child, or does hereby authorize any member of Idaho Snow Sports Association, or its appointee, to transport said minor to the most accessible medical facility or hospital preference, and further authorize any qualified physician to provide any necessary care to said minor child deemed essential to said child's health or well-being. In the event surgery is necessary; I authorize any licensed surgeon to perform surgery that is deemed necessary by two licensed physicians.

**Health and Emergency Notification**

Physician: Name \_\_\_\_\_ Phone# \_\_\_\_\_ Hospital \_\_\_\_\_

Medication taken regularly & Health Insurance Company:

Parent/Legal Guardian: \_\_\_\_\_ Phone # \_\_\_\_\_

Alternative Contact Person: \_\_\_\_\_ Phone# \_\_\_\_\_

**RELEASE: IDAHO SNOW SPORTS ASSOCIATION, INC (ISSA)**

I recognize that skiing/snowboarding is a hazardous sport that can result in serious injury (or death). I understand that the activities in which I am participating and which I voluntarily engage including but not limited to: skiing and snowboarding in their various forms, as well as preparation for participation in, dry land training, coaching, volunteering, officiating and related activities in Alpine, Nordic, Freestyle, Disabled, and Snowboarding competitions and clinics (hereinafter collectively referred to as "Activities"), involve many **RISKS, DANGERS and HAZARDS**. These risks, dangers and hazards include, but are not limited to, changing weather and snow conditions variations in steepness or terrain natural and man-made obstacles and structures, equipment failure collision with objects or structures, being struck by skiers/riders or equipment and exceeding one's own abilities. I further understand that ski and snowboard training may be more hazardous than recreational skiing and snowboarding. I understand that **INJURIES OF ALL TYPES ARE A COMMON AND ORDINARY OCCURRENCE of the Activities.**

I also know that personal training, coaching, instruction, supervision and enforcement of rules by Idaho Snow Sports Association, its subsidiaries, affiliates, officers, directors, volunteers, employees, coaches, contractors and representatives, local ski clubs, competition organizers and sponsors, all mountain recreation facilities (Brundage, Bogus Basin, Little Ski Hill, Sun Valley, Tamarack, Copper Mountain, or any other snow sports mountain licensed for snow sports activities) including ski and snowboard facility operators (hereinafter the term "ISSA" shall be used to refer to all such persons and entities collectively) do not and cannot guarantee my safety. I accept the risks inherent in all above. I agree to Release, Forever Discharge, Defend, Indemnify, and Hold Harmless ISSA, and its affiliates, The U.S. Government, their respective agents, officers, directors, owners, contractors, volunteers, employees, insurers and real and personal property owners, as well as equipment manufacturers and distributors, and all event sponsors (hereinafter "Releases") of and from any and all liability, claims, liens, demands, actions and causes of action whatsoever arising out of or related to any loss, cost, damage or injury, including death, of any person or damage to property of any kind related in any way to the Program's operations or the errors or omissions of the Program, its agents, subcontractors, volunteers, or any other person directly or indirectly employed by them, or any of them, while engaged in any activity associated with this agreement whether contractually or otherwise.

If I am signing on behalf of a minor, I recognize that I may not release any claims the minor may have. However, I accept full responsibility for all medical expenses incurred or rehabilitation services required as a result of the minor's participation in or travel to and from training or event facilities. I also agree to RELEASE, HOLD HARMLESS, and INDEMNIFY Idaho Snow Sports Association, Inc. (ISSA) for any claims brought by the minor.

In consideration of the privilege to distribute these materials, the Boise, Eagle, Meridian, Kuna School Districts, Danik Gymnasium, Jump Time or any other public or private licensed school or training facility and Idaho Mountain Freeride Series SHALL BE HELD HARMLESS from any cause of action, claim or petition filed in any court or administrative tribunal arising out of the distribution of these materials, including all costs, attorney's fees and judgment of awards. I further understand that the SCHOOL DISTRICT RULES OF CONDUCT and in particular rules which govern the uses of alcohol, tobacco and drugs will be used as a standard for potential dismissal from the Snow Sports Program and/or activities. This Agreement shall be construed in accordance with, and governed by the substantive laws of the State of Idaho, without reference to principles governing choice or conflicts of laws. In the event any portion of this release is found to be unenforceable, the remaining terms shall be fully enforceable.

## **PARENT PERMISSION**

The undersigned being the parent or legal guardian of, \_\_\_\_\_ permits the student to participate in the Idaho Snow Sports Association training, education program and is aware of the refund policy guidelines, has accident insurance for the student, and agrees not to hold the ISSA or its agents liable for any accident, damages or loss of equipment which may be sustained as a result of participation in this program. The undersigned parties agree to read and abide by the **ISSA Membership Rules and Regulations**.

**STUDENT Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Legal Guardian Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

|               |                                                                |
|---------------|----------------------------------------------------------------|
| <b>Coach:</b> | (Must be signed by authorized coaching representative of ISSA) |
|---------------|----------------------------------------------------------------|

**\*\*Membership & Activity Fees – 2014/15\*\***  
**(Scholarships available subject to application & Board approval)**

- ISSA Training Options:

**Location (circle one)**

- Option #1 Gateway (\$725.00)
- Option #2 Gateway/Tamarack (\$1000.00)
- Option #3 Gateway/Sun Valley (\$1500.00)

- Minimum deposit 50% of posted fees at registration – Balance due Jan 15, 2015

**ISSA PO Box 1577, Boise, ID 83701**

**Kevin Allen Cell Phone: (208) 315-3794 or Mike Teschner Cell Phone: (208) 794-9970**