



P. O. Box 317  
Government Camp, OR 97028  
Phone/Fax 503-337-2230

**OFFICIAL RECEIPT AND CONFIRMATION FOR**  
**OREGON HIGH SCHOOL SPRING SKI CAMP 2022**

Thank you for registering for the Oregon High School Spring Ski Camp to be held at Timberline Lodge May 14-15, 2022. The balance of the Coaching fee/Lodging fee/Transportation fee is due on or prior to your first day of training.

Enclosed is a Questionnaire and a Medical and a Liability Release. Each requires your signature and the signature of your parent or guardian. Please also fill out Timberline on-line release form even if you already filled one of those out for your high school team this past winter. We need the forms before you begin training.

**ARRIVALS**

Training will begin each morning at 8:30am near the Smokey-the-Bear inside the Wy'East Day lodge, just up the stairs from the ski school desk on the left. Please be on time.

**DEPARTURES**

Training will end around 2:45 PM each day. You can have your parents meet you at Timberline Lodge.

**LIFT TICKETS:**

Lift Tickets are NOT included in the coaching fee. Participants will need to purchase their own lift tickets or use their season pass or Fusion Pass.

Sincerely,

Mike Annett, Director  
Mt. Hood Summer Ski Camps, Inc.

**OREGON HIGH SCHOOL SPRING SKI CAMP 2022**  
**QUESTIONNAIRE AND MEDICAL RELEASE**

NAME \_\_\_\_\_ SEX \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_

Name of parent or guardian (or person to contact in emergency): \_\_\_\_\_

Mom \_\_\_\_\_ TELEPHONE(\_\_\_\_) \_\_\_\_\_

Dad \_\_\_\_\_ TELEPHONE(\_\_\_\_) \_\_\_\_\_

**MEDICAL AND HEALTH INFORMATION**

**\*\*Each camp participant must have his own health and accident insurance.\*\***

Medical insurance plan \_\_\_\_\_ Policy # \_\_\_\_\_

Social Security number of policy holder \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone # \_\_\_\_\_

Are you allergic to any medication? YES \_\_\_\_\_ NO \_\_\_\_\_ Which one? \_\_\_\_\_

Any other allergies? \_\_\_\_\_

Are you currently taking any medication? YES \_\_\_\_\_ NO \_\_\_\_\_ What? \_\_\_\_\_

Are you currently in rehabilitation for any injuries? YES \_\_\_\_\_ NO \_\_\_\_\_  
(If yes, include Doctor's release)

Date of last tetanus shot. \_\_\_\_\_

**MEDICAL RELEASE:**

I hereby grant permission for the directors of Oregon High School Winter Break Ski Camp to obtain emergency medical treatment and surgery for \_\_\_\_\_ in case of injury or illness. I recognize that all possible attempts shall be made to contact me.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of camper or parent if under 18



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E mail mike@mthood.com

**SKI CAMP RELEASE OF LIABILITY**

1. I am aware that skiing, rock climbing, hiking and ski mountaineering are hazardous sports that include certain risks and dangers, including the risk of serious injury to me. I voluntarily accept full responsibility for all risks involved, including risks inherent in the ski area/mountain environment.
2. I accept my responsibility to ski safely at all times, to abide by the Skier Responsibility Code, and to obey all posted behavior notices and any other ski area rules and policies. Any equipment I use while skiing, I use at my own risk.
3. I agree to **RELEASE, HOLD HARMLESS, and INDEMNIFY** Mt. Hood Summer Ski Camp, Inc., and any of (their/its) employees, agents, contractors, subsidiaries, officers or owners from all claims for injury or damage resulting from any cause, including but not to exceed ordinary negligence as allowed by the state of Oregon, which arises out of participation in or travel to and from Mt. Hood Summer Ski Camp. This release is also binding as to any other persons, including all family members, heirs, and executors.
4. 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 as a result of the minor's participation in or travel to and from Mt. Hood Summer Ski Camp. I also agree to **RELEASE, HOLD HARMLESS, and INDEMNIFY** Mt. Hood Summer Ski Camp for any claims brought by or on behalf of the minor.
5. This release does not apply to gross negligence or intentional acts.

\_\_\_\_\_  
STUDENT

DATE \_\_\_\_\_

\_\_\_\_\_  
PARENT OR LEGAL GUARDIAN IF UNDER 18