

SKIBACS Crystal Lodge Reservation Form

Reservation confirmed on receipt of payment.

Current Year Membership #							Month:								
Name (one per line)		Member		Child's	Gender		Dates:								Total
Last	First	Yes	No	Age	M	F	Nights:	Fri	Sat	Sun	Mon	Tues	Wed	Thurs	Fees
Send confirmation to:							M/S:			Lodge Credits Enclosed # ()					
Name:							Wk Ph:			Cleaning and Damage Deposit					
Address:							Hm Ph:								
City, State, Zip:							pgr/cell:			Total Lodging Fee Enclosed \$					
							email:								

Note: Bring bedding and towels, toiletries, clothing, and food. NO PETS, NO SMOKING in lodge. Children under 13 years of age are not to be unsupervised in the lodge. Children left unattended will be asked to join their parents.

I state that I wish to participate in this activity offered by SKIBACS, a Boeing Recreation Club. I recognize that any SKIBACS activities may involve certain dangers. I certify that I am aware of all the inherent dangers of snow skiing (downhill and cross-country), including but not limited to falls due to ice, inexperience or snow or terrain conditions, racing in remote locations, accidents, or illness in remote areas without medical facilities, vehicle shuttling, the forces of nature, and the action of participants and other persons. In consideration for the right to participate in SKIBACS activities, I hereby release SKIBACS and any of its members and the Boeing Company from any and all liability, claims and causes of action arising out of or in any way connected with my participation in any SKIBACS activities. I personally assume all risks in connection with these activities, and further agree to indemnify SKIBACS and its members and the Boeing Company of all liability, claims and causes of action, which I may have arising from my participation in club activities. The terms of this agreement will serve as a release and indemnify agreement for my heirs, personal representative and for all members of my family including any minors (Parents or legal guardians must sign for all persons under 18 years of age).

I have fully informed myself of the contents of this release and indemnity by reading it before I sign it.

Signed: _____ Date: _____

(Parent or legal guardian for children under 18)

Make checks payable to: SKIBACS Issue a separate check for group cleaning/damage deposits.

Send to SKIBACS, P.O. Box 3707, M/S 4H-58 Seattle, WA 98124

Call or e-mail our Reservationist, Vivian Floyd at 206-400-SKI2 (7542) or info@skibacs.org for availability of desired dates, questions, or directions to the lodge.