



LIABILITY WAIVER AND PERMISSION FORM

Participant Information

Name: _____
Date of Birth: _____
Address: _____
City: _____ State: _____ ZIP: _____
Parent/Guardian Name (if participant is under 18): _____
Parent/Guardian Phone: _____

Acknowledgment of Risk and Waiver of Liability (Please initial and sign)

I, the undersigned, understand and acknowledge that participation in *Ski the Summit* involves inherent risks, including but not limited to:

- _____ The possibility of falls, collisions, or other skiing and snowboarding accidents, resulting in injuries or even death;
- _____ Potential exposure to varying weather and environmental conditions;
- _____ Risks associated with transportation to and from the event.

By signing below, I acknowledge that I fully understand and accept these risks and voluntarily agree to participate in **Ski the Summit**.

_____ In consideration of participation in this event, I hereby release, indemnify, and hold harmless Mount Ellis Academy, the Montana Conference of Seventh-day Adventists, their officers, employees, volunteers, agents, and affiliates (collectively referred to as "the Released Parties") from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of or related to any injury, loss, or damage to person or property, including death, that may occur as a result of participation in this event, whether caused by negligence or otherwise.

If the participant is under 18 years of age:

I, the undersigned parent or legal guardian, hereby give permission for my child, _____, to participate in *Ski the Summit* hosted by Mount Ellis Academy. I understand and agree to the terms outlined above and accept full responsibility for any injury, damage, or other liability arising from my child's participation in the event. In case of emergency, I understand every effort will be made to contact me. I further authorize Mount Ellis Academy staff, volunteers, or medical personnel to seek medical treatment on my child's behalf in the event of an emergency and agree to be fully responsible for any associated costs.

Photo Release

I DO DO NOT authorize Mount Ellis Academy to use photos or videos of me/my child for promotional or educational purposes, such as brochures, websites, or social media.

Acknowledgment and Agreement

I have read and fully understand this Liability Waiver and Permission Form, and I voluntarily agree to its terms. I understand that by signing this document, I am waiving legal rights that may arise from participation in this event.

Participant Signature (If under 18, parent/guardian must sign below) Date

Parent/Guardian Signature Date

For any questions about **Ski the Summit** or this form, please contact Mount Ellis Academy at 406.587.5178 ext 105.