SEASON PASS APPLICATION

My Recreational Mountain Co-operative 4805 Highway 16 West, Terrace, BC V8G 0H6

Ph: 250-635-3773 Fax: 250-635-9773 Email: shamesmountain@citywest.ca



| Purc | hasers Nan | ne: | | | Date: | | | | | _ |
|---|--|--|---|--|--|--|---|--|--|---|
| Addre | ess: | | | | | | | | | - |
| City: | | | | | Prov.: | Postal Code: | | | _ | |
| Phon | e No.: | | | | Email: | | | | | |
| | | | F | LEASE P | RINT CLEARLY | | | | | |
| Office Use | Passholders Name | | | | Birthday month/day/year | Member Yes / No | · · · · · · · · · · · · · · · · · · · | | Individual Pass Price ** | |
| 1 | | | | | | | | | | |
| 2 | | | | | | | | | | |
| 3 | | | | | | | | | | |
| 4 | | | | | | | | | | |
| 5 | | | | | | | | | | |
| 6 | | | | | | | | | | |
| Pass fee category determined by age of applicant as of Dec. 1 of upo | | | | | oming season | PASS TOTAL | | L | \$ | |
| **Pass Price includes \$20 Surcharge and 2% Crown Land Fee | | | | | | 10% Family Discount (-) | | unt (-) | \$ | |
| | | | | | | | SUBTOTAL | | \$ | |
| | | | | | | 5% G | ST on Sub | total | \$ | |
| Guarantee | ed Minimum Operat | ing Day Policy - I have read | & | | Guaranteed | Minimum Operating Day Policy | | | FREE | |
| understand theTerms and Conditions of this New Policy as shown below. | | | | | J | | ra Costs* | | \$ | |
| ***Extra Costs: Locker, Jr. Shreddar Payments, Membership | | | | | | TOTAL PURCHASE | | ASE | \$ | |
| | | | act Downtown 1 | | | CHECHE | DEDIT | V//CA | D4/C | 1 |
| | AYMENT | Please circle | E-Transfer | | e Sale CASH | CHEQUE | DEBIT | VISA | M/C | ł |
| N | OTE: FIII IN | Creait Cara inf | o. ONLY if mail | ing or Jax | _ | Note: | 2 Dia | it CVC # | | |
| | | | | | Expiry D | | 3 Dig | IL CVC # | | |
| Policy". W all lifts in c pass, that NEW Polic every oper to weathe other than telemarks | We will fully refund, (in peration during region individual will be recty for the 2020-2021 rating day less than it reconditions or mechal the authorized passibiling for remunerations. | this will include all taxes and ular operating times. (ii) A va juired to purchase a regular I season passholder, is the "G 50, you will be credited with tanical failure of equipment. sholder, both owner and use on on lands owned or contro | proval. (i) Proof of birthdate fees paid) no questions aske alid season pass must be woi lift ticket at the regular price tauranteed Minimum Opera 2%, (up to 76%). This credit (vi) A Season Pass expires or r will be expelled from Sham | must be shown of d, your Season F in at all times when the sound of th | when seeking age-based discourance processing lifts and must be to issued. (iv) A fee of (\$30 + G). Your Season Pass for the 202 the purchase of your 2021-2022 April of each year. (C) RESTRICE the pass will be revoked without yee. (iv) Season pass cards remaineresiding in 1 household. | nts. (ii) NEW for the 2020- 2020. (B) USE OF THE PAS clearly visible to the lift op ST) will be assessed for re 0-2021 season has a Guar Season Pass. Refunds wi TIONS: (i) Passes are NOT ut refund. (iii) Each passho | es (i) The holder of erator. (iii) If a Pas placement of a sec anteed Minimum a I not be issued in of transferable. (ii) older agrees he/sh | a valid season pass is sholder is not able to p ason pass identification amount of 50 Operatin cases of cancellation o Should a pass be found e will not teach skiing, | permitted to use produce his/her n card, if lost. (v) ng days. For f operations due d on a person /snowboarding or | |
| Agreer | ment' and fur RTANT: Paren | ther, that by signin t/Legal Guardian n | ng this document, h nust sign for all mir | ne/she wai | Release of Liability, W ves certain legal righ Iders (those under th and understand th | ts, including the including th | right to sue. s) at time of | purchase | Indemnity | |
| Purcha | ser's Signatu | re (Must be 19 yea | rs or older to sign) | | Witness S | ignature | | | | |
| | | | OFFICE U | SE - CIRCL | E ONLY WHEN COM | IPLETED | | | | |
| | er Signed 1 | | Backcountry Wa | | | Grade 5 Repo | ort Card/P | rincipal Lett | er | |
| | ent Proof of Photo 1 2 3 4 | f Full Time Yes , 156 | / No JR. Shro | ed Payme 456 | nt | | M | MC Ren Initia | al | |