



MAIL TO: CAMDEN SNOW BOWL P.O. BOX 1207 CAMDEN, ME 04843

# 2020-2021 SEASON PASS APPLICATION FORM

20 Barnestown Road | Camden, ME | 04843 | 207-236-3438 | 207-230-0490 fax

### Early Bird Rates\*

\*NEW: Sept. 1 - Oct. 31, 2020

	Camden Resident	Non-Resident
• Adult (18-69).....	\$299	\$429
• Student & Military with ID.....	\$219	\$319
• Youth under 6 years old & Senior 70+.....	\$50	\$100
• Family Maximum.....	\$799	\$1,099

(Paid in full by Thursday, Oct. 31, 2020)

### Regular Rates

Beginning Nov. 1, 2020

	Camden Resident	Non-Resident
• Adult (18-69).....	\$459	\$529
• Student & Military with ID.....	\$329	\$399
• Youth under 6 years old & Senior 70+.....	\$75	\$125
• Family Maximum.....	\$1,099	\$1,399

Camden Resident = a Camden residential property tax-payer or resident occupying a dwelling in Camden for more than 180 days in a calendar year  
Transferable Pass (purchase anytime) one pass: \$600, two passes: \$1,000

Skier Name(s): (First, Last, Nickname)	Birthdate	Age today	\$ Rate
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

Home Address: \_\_\_\_\_ (If different) Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

EMERGENCY Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**ASSUMPTION OF RISK/RELEASE OF LIABILITY:** Under Maine law, a skier/snowboarder assumes the risk of any injury to person or property resulting from any of the inherent dangers and risks of skiing and may not recover from any ski area operator for any injury resulting from any of the inherent dangers and risks of skiing, including, but not limited to: existing and changing weather conditions; existing and changing snow conditions such as ice, hardpack, powder, packed powder, corn, crust and slush and cut-up, granular and machine-made snow; surface or subsurface conditions such as dirt, grass, bare spots, rocks, stumps, trees, forest growth or other natural objects and collisions with such natural objects; lift towers, lights, signs, posts, fences, mazes or enclosures, hydrants, water or air pipes, snowmaking and snow-grooming equipment, marked or lit trail maintenance vehicles and snowmobiles, and other man-made structures or objects and their components, and collisions with such man-made objects; variations in steepness or terrain, whether natural or as a result of slope design, snowmaking or grooming operations, including but not limited to ski jumps, roads and catwalks or other terrain modifications; the presence of and collisions with other skiers; and the failure of skiers to ski safely, in control or within their own abilities. This Assumption of Risk also applies to the toboggan chute, snowshoe and hiking trails, uphill travel by skiers/snowboarders and all other winter activity users at the Camden Snow Bowl. Photographs: The Camden Snow Bowl may take pictures or videos of participants on the mountain, in programs. Photos and video s may appear in promotional materials. Please alert staff or the photographer if you (or your child) do not wish to be photographed.

- ALL PASSES MUST BE WORN CONSPICUOUSLY, show upon request
  - Individual season passes are non-transferable and non-refundable
  - Report lost passes immediately to the office/ticketing. Replacement cost: \$20
  - Watch website for updates, events & future information
  - Any person without their season pass card must display a day ticket on chairlift
  - Season passes are revocable at any time for misconduct, policy violations
  - Family Maximum consists of up to two adults & their dependent children
- During U.S. National Toboggan Championships weekend (Feb. 6-7, 2021) there will be a \$10 per car fee to park onsite. Shuttle bus service from downtown will be available throughout the weekend.

YOUR SIGNATURE below verifies that you have read, understand and agree to the above statements.

\_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Adult Pass Holder/Parent/Guardian

YOUR SIGNATURE below verifies that you have read, understand and agree to the above statements.

\_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Second Adult Pass Holder/Parent/Guardian

**OFFICE USE:**  
 Visa / MasterCard / Discover / Amex      Check#: \_\_\_\_\_      Cash Amt.: \_\_\_\_\_      Total Paid: \_\_\_\_\_      Date: \_\_\_\_\_