

D/SAC High School Holiday Camp

Name	Age	Fee	Lift ticket	Ski rental	total
		\$149*	+	+	=
		\$149*	+	+	=

4 day lift ticket \$60
 4 day ski rental \$40

Total _____

***registration after Dec 1 = 169.00** \$Payment info: check payable to Duluth Superior Alpine Club

Credit card: Visa \ Mastercard (please circle one)

Card # _____ exp date _____

Name on card _____

Signature _____

Printed name _____ Phone _____

Release: I agree that I will not hold the Duluth/Superior Alpine Club, Spirit Mountain or any person or entity affiliated with them liable in any manner for any accident, injury or liability of any type that may occur during training or racing in connection with this club, and I agree that I will indemnify and hold them harmless for any claims or expenses.

Parent/guardian

Signature _____

Address to send notices of camp group to:

Mail payment and attached registration to: Pat Melby
 4122 Colorado St.
 Duluth, MN 55804