

PLEASE COMPLETE ALL SHADED AREAS BELOW

RENTAL AGREEMENT

RETURN DATE

FIRST LETTER OF LAST NAME

NAME _____				
LAST		FIRST		MIDDLE INITIAL
HOME ADDRESS _____				
CITY		STATE	ZIP CODE	
E-MAIL _____		LOCAL PHONE _____	HOME PHONE _____	
LOCAL ACCOMMODATIONS _____			GROUP NAME _____	
WEIGHT LBS. or KILOS	HEIGHT FEET or METERS	AGE	SHOE SIZE	SKIER TYPE: See chart, circle one
				I II III

PACKAGE TYPE:	DAILY PRICE:	DAYS PAID FOR	TOTAL PAID \$	DATE OUT
LOCATION		STORE #		
SNOWBOARD STANCE:		SKI / BOARD / SKIBOARD / SP DEVICE		
<input type="checkbox"/> REGULAR (Left Foot Forward) <input type="checkbox"/> GOOFY (Rt. Foot Forward)		SIZE		
		SERIAL #		BINDING
		BOOT BRAND		SIZE
		SERIAL #		BOOT SOLE LENGTH
SKIER CODE		SETTINGS		LEFT RIGHT
		TOE		
		HEAL		
TECH SIGNATURE _____				

RELEASE AND INDEMNITY AGREEMENT

- I understand that Alpine and Nordic ski equipment forms a part of or all of a ski-boot-binding system which will NOT RELEASE OR RETAIN at all times or under all circumstances where RELEASE OR RETENTION may prevent injury to any part of the skier's body, nor is it possible to predict every situation in which it will RELEASE OR RETAIN and it is, therefore, no guarantee of safety to any portion of my body. If Snowboard or Skiboard equipment is being furnished, I understand that these systems are NOT DESIGNED NOR INTENDED TO RELEASE in the event of a fall or other type of accident, that it functions differently from typical Alpine ski equipment and that the use does NOT PROTECT AGAINST NOR REDUCE THE RISK of injuries to any part of the user's body.
- If a helmet is being furnished, I acknowledge that the helmet rented by me has been properly fit by Mt. Bachelor, Inc. I further warrant that the helmet is comfortably snug and when I fasten the chin strap and shake my head, there is no significant movement of the helmet. I understand that this helmet may reduce or mitigate the severity of injuries to my head, but is no guarantee of my safety. I further recognize that helmets have limited capability as far as shock absorption. I agree that I will be the only person using the helmet during this rental period.
- I understand that a leash or other runaway ski or snowboard prevention system must be used with the rented equipment at all times, including while riding chairlifts.
- I have received instructions in the use of this equipment and have received satisfactory answers to any questions I may have regarding the use and function of this equipment. If I feel the equipment is not functioning properly, I will stop using it and have it inspected, repaired or readjusted by a qualified technician.
- In consideration of my participation in ski school and/or rental of equipment and use of Mt. Bachelor, Inc.'s premises and facilities, I hereby agree to RELEASE AND INDEMNIFY Mt. Bachelor, Inc., its officers and directors, owners, agents, landowners, affiliated companies, employees, and manufacturers and distributors of rental equipment (hereinafter collectively "Providers") from any and all liability that results from claims or lawsuits for personal injury, death, and property damage or loss in any way connected to alpine or nordic skiing, snowboarding, snow riding, ski school activities, lift riding and/or the use of this equipment. I understand that this release is applicable to any claim based upon negligence or breach of warranty and any other theory of recovery, except claims based upon willful or intentional misconduct. This release includes, but is not limited to, any and all claims that might result from negligence in the selection, adjustment, maintenance, or use of rental equipment. I agree that this release agreement is binding upon me, a minor if I am signing on his or her behalf, my heirs, guardians, assigns and legal representatives.
- I also agree that all disputes between myself or my child and Mt. Bachelor, Inc. arising from my use of Mt. Bachelor, Inc.'s facilities or services will be governed by the laws of the State of Oregon and the exclusive jurisdiction thereof shall be in the state courts of the State of Oregon, and the venue for these disputes shall be in Deschutes County, Oregon.
- I accept this equipment "AS IS" AND WITHOUT ANY WARRANTIES, express or otherwise, except those stated herein. I accept full responsibility for the care of this equipment while it is in my possession. I will be responsible for the replacement, at full retail value, of any equipment which is not returned to the shop or which is damaged, and I will return this equipment by the agreed date, in clean condition to avoid any additional charges. I understand that rail riding may cause damage to this equipment for which I will be responsible.
- I agree that the weight, height, age and skier type/rider stance recorded on this form are correct. I understand that this information may be used to select or adjust my equipment.
- I agree to verify that the final settings recorded above on this form agree with the visual indicator settings of the bindings (skiing only). I agree to check this equipment before each use (including the binding anti-friction device skiing only), and that this equipment will not be used if any parts are loose, worn, damaged or missing.

I HAVE CAREFULLY READ, UNDERSTOOD AND AGREED TO THE TERMS OF THIS RELEASE AND INDEMNITY AGREEMENT. I AM AWARE THAT THIS IS A LEGALLY BINDING CONTRACT.

USER'S NAME (Print): _____

USER'S SIGNATURE X _____ DATE _____

IF MINOR(UNDER 18), PARENT/GUARDIAN MUST EXECUTE MINOR RELEASE BELOW.

PARENT/GUARDIAN: I verify that I am the parent/guardian and/or have the authority to enter into this agreement on behalf of the minor. I have authority to enter into this agreement on behalf of the minor. I agree to be bound by its terms. I accept full responsibility for all medical expenses incurred as a result of the minor's use of this equipment and the ski area's facilities, and I agree to indemnify and hold harmless the above-referenced Providers from any claim brought by, or on behalf of the minor.

PARENT/GUARDIAN'S SIGNATURE X _____ DATE _____

CREDIT CARD DEPOSIT INFORMATION

CREDIT CARD # _____ EXP. DATE: _____

I authorize use of this credit card for any and all rental charges incurred in connection with this agreement including delinquent charges.

Signature _____ Date _____

FOR SUBSTITUTION ONLY:	
SKI / BOARD / SKIBOARD / SP DEVICE	SIZE
SERIAL #	BINDING
BOOT BRAND	SIZE
SERIAL #	BOOT SOLE LENGTH
SKIER CODE	SETTINGS
	LEFT RIGHT
	TOE
	HEAL
TECH SIGNATURE _____	

FOR SUBSTITUTION ONLY:	
SKI / BOARD / SKIBOARD / SP DEVICE	SIZE
SERIAL #	BINDING
BOOT BRAND	SIZE
SERIAL #	BOOT SOLE LENGTH
SKIER CODE	SETTINGS
	LEFT RIGHT
	TOE
	HEAL
TECH SIGNATURE _____	

CUSTOMER SIGNATURE X _____



13000 CENTURY DRIVE • BEND, OREGON 97702
(541) 382-2442 EXT. 2121

RENTALS DUE AT 4:15

SKI CORRAL IS FREE FOR MT. BACHELOR RENTAL EQUIPMENT

Rev. 10/08

EQUIPMENT DAMAGE INSURANCE \$3 PER DAY PER SET. NOT INSURED AGAINST THEFT.

ACCEPTED _____ This shop will absorb the cost of repairing any damaged equipment caused during normal use, however, I am still responsible for the FULL value of any lost misplaced or stolen equipment (or damage due to negligence).

DECLINED _____ I am responsible for the FULL value of any loss of equipment, regardless of fault, including repair and /or replacement or damaged, lost misplaced or stolen equipment.