



Volunteer Ambassador Information Sheet

Date: _____ Primary Base Area: _____ Position: _____

NAME: _____
AS IT APPEARS ON YOUR SOCIAL SECURITY CARD (LAST) (FIRST) (MIDDLE)

CURRENT ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

PERMANENT ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

Home Phone: _____ Work Phone: _____ Cell Ph: _____

Email: _____

PERSON TO CONTACT IN CASE OF EMERGENCY:

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____ PHONE #: _____

HAVE YOU <i>EVER</i> BEEN CONVICTED OF A FELONY, OR WITHIN THE LAST FIVE YEARS, A MISDEMEANOR? <input type="checkbox"/> YES <input type="checkbox"/> NO
NOTE: A CONVICTION WILL NOT NECESSARILY BAR VOLUNTEER STATUS.
IF YES, STATE THE DATE OF CONVICTION AND NATURE OF THE OFFENSE: _____

FOREIGN LANGUAGE LISTING:

Ski Lifts, Inc. keeps a Foreign Language Listing of volunteers who speak a language other than English in order to accommodate guests who are in need of a translator. If you are interested in assisting in this program, please list any languages you speak fluently

LANGUAGE(S) SPOKEN FLUENTLY:

NOTICE:

SOME POSITIONS REQUIRE BACKGROUND, REFERENCE, CREDIT CHECKS AND/OR DRUG TESTING. I UNDERSTAND THAT AS A CONDITION OF BEING ALLOWED TO PERFORM AS A VOLUNTEER AT THE SUMMIT AT SNOQUALMIE, I MAY BE REQUIRED TO COOPERATE IN TESTING FOR THE PRESENCE OF DRUGS AND/OR ALCOHOL IN MY SYSTEM, AT SUCH REASONABLE TIME AND MANNER DESIGNATED BY THE SUMMIT AT SNOQUALMIE, AND I AGREE TO SIGN ALL NECESSARY AUTHORIZATION FORMS IN CONNECTION WITH SUCH TESTING. I AGREE TO ADHERE TO THE COMPANY'S GROOMING POLICY. I AUTHORIZE INVESTIGATION OF ALL INFORMATION PROVIDED BY ME ON THIS INFORMATION SHEET AND I RELEASE FROM LIABILITY BOTH THE SUMMIT AT SNOQUALMIE AND THOSE WHO SUPPLY REFERENCE INFORMATION. I UNDERSTAND THAT NEITHER THIS DOCUMENT NOR ANY STATEMENT OR ACTION BY THE SUMMIT AT SNOQUALMIE SHOULD BE UNDERSTOOD TO CREATE A CONTRACT OF EMPLOYMENT. I UNDERSTAND THAT MY STATUS AS A VOLUNTEER MAY BE TERMINATED AT ANY TIME WITHOUT PREVIOUS NOTICE. I UNDERSTAND THAT IT IS THE POLICY OF THE SUMMIT AT SNOQUALMIE TO PROVIDE EQUAL OPPORTUNITY AND TO MAKE ALL VOLUNTEER STATUS DECISIONS WITHOUT REGARD TO RACE, COLOR, AGE, SEX, MARITAL STATUS, ANCESTRY, RELIGION, NATIONAL ORIGIN, CITIZENSHIP OR DISABILITY. AS A CONDITION OF BEING ALLOWED TO PERFORM IN A VOLUNTEER STATUS, I AGREE TO FULLY AND COMPLETELY COMPLY WITH ALL POLICIES CONCERNING ALCOHOL, DRUGS, SAFETY, LOSS CONTROL AND THEFT, AND FURTHER CONSENT TO SEARCHES, INSPECTIONS, EXAMINATIONS AND TESTS AS MAY BE REQUIRED BY POLICY. I UNDERSTAND THAT I MUST SIGN THE FOLLOWING VOLUNTEER LIABILITY RELEASE PRIOR TO ENGAGING IN ANY VOLUNTEER ACTIVITIES AT THE SUMMIT AT SNOQUALMIE. I UNDERSTAND THAT FALSIFICATION OR OMISSION OF INFORMATION ON THIS FORM MAY RESULT IN THE TERMINATION OF MY VOLUNTEER STATUS. I CERTIFY THAT THE INFORMATION THAT I HAVE PROVIDED ON THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature: _____ Date: _____



SUMMIT VOLUNTEER AMBASSADOR

ACKNOWLEDGEMENT OF RISKS & HAZARDS, LIABILITY RELEASE AND AGREEMENT NOT TO SUE As an express condition of my participation in the volunteer activity, I agree and acknowledge as follows:

1. I accept for use, as is, any equipment issued to me and accept full responsibility for its care while it is in my possession. I agree to release, forever discharge, indemnify, defend and hold harmless The Summit at Snoqualmie® for any intentional loss or damage I may cause to this equipment.
2. I understand there are numerous risks and dangers inherent in my participation in skiing, riding and other winter sports and activities including but not limited to: continually changing weather conditions and surface and sub-surface snow and/or ice conditions, the use of aerial and/or surface lifts, bare ground, variations in terrain, moguls, ruts, bumps, terrain features, rocks, forest growth, trees, branches, debris, lifts and their components, snowmaking and grooming equipment or other natural or man-made objects as well as collisions with other participants and spectators, or any of the objects included in this release. Further, I understand that there may be other risks not known to me or reasonably foreseeable at this time.
3. I hereby freely and expressly assume and accept the responsibility for any and all risks of my injury or death, or damage to my property, arising from my participation in skiing and snowboarding, or other winter sports and activities, while engaged in ambassador activities or while present on The Summit at Snoqualmie®, Crystal Mountain Inc., and other Boyne USA premises. I also agree that participation in ambassador activities, training, testing and other ambassador-related activities, involves a higher degree of risk than recreational skiing and riding and I understand and freely accept those risks.
4. I agree to RELEASE and forever discharge, INDEMNIFY, DEFEND and HOLD HARMLESS Ski Lifts, Inc. DBA The Summit at Snoqualmie®, Crystal Mountain Inc., and other Boyne USA facilities, subsidiary and affiliated companies, their respective agents, officers, directors, owners, contractors, volunteers, employees, insurers, and real and personal property owners (collectively, the "Releasees") from any and all losses, damages, costs and attorney's fees, resulting from any and all claims or suits that I may bring, for personal injury, death and/or property damage that may in any way arise out of my participation in these activities, related activities, or my use of the equipment, or any equipment, on The Summit at Snoqualmie®, Crystal Mountain Inc., and other Boyne USA premises, regardless of how or by whom or by what the personal injury, death and/or property damage was caused.
5. I agree to release, forever discharge, indemnify, defend, and hold harmless the RELEASEES from any and all claims, suits, costs and attorneys fees for damage and personal injury to me or my property resulting from the negligent acts or omissions of the RELEASEES. I understand that the RELEASEES are not responsible for the consequences of their own negligence, that is, their failure to use reasonable care in any way.
6. I understand that this agreement shall be binding upon my heirs, executors, administrators, and assigns and shall be governed by the applicable laws of the State of Washington. I also understand that if any part of this agreement is determined to be unenforceable, all other parts shall be given full force and effect. I agree that exclusive jurisdiction and venue for any legal action against the RELEASEES shall be in the courts of King County, Washington and that no claims against the RELEASEES shall be brought in any other jurisdiction.
7. I hereby grant permission to the RELEASEES to use my image, picture, or other likeness(es) (collectively, "Image"), whether video, digital or print, for commercial purposes or otherwise, without restriction as to frequency, duration or medium.
8. I understand that permission to use The Summit at Snoqualmie®, Crystal Mountain Inc., other Boyne USA facilities, premises and/or equipment is being given to the undersigned participant in exchange for the execution of this Liability Release and Agreement Not to Sue.
9. I have read the above paragraphs and fully understand them. I understand that this is a RELEASE OF LIABILITY, which will legally prevent me or any other person from filing suit, or making any other claims for damages in the event of personal injury, death and/or property damage. I freely and voluntarily enter into this agreement. I have made no misrepresentations to RELEASEES regarding my name or age.
10. This document supersedes any other agreements or representations by and between the parties the volunteer may be required to sign for access to the facilities and premises.

In accordance with being allowed to participate in volunteer activities at the Summit at Snoqualmie, volunteer acknowledges the following:

As a volunteer of The Summit at Snoqualmie®, participation is a privilege. As such, you are expected to know and follow all of the mountain rules. You should always set a good example for our guests and your fellow volunteers by skiing, riding and participating in other winter activities in a safe and responsible manner. "Your Responsibility Code" is a partial list of expected behavior. The code is posted in numerous places around the resort for your review.

1. Volunteers may not ski/ride in uniform while off-duty.
2. Volunteer acknowledges that if they choose to use skiing and riding privileges at The Summit at Snoqualmie® when not scheduled, on their own time, that such activity is voluntary participation in an off-duty recreational or social activity, which (1) does not constitute any part of the Volunteer's work-related duties and (2) is neither reasonably expected nor required (expressly or implied) by The Summit at Snoqualmie®.
3. Volunteer acknowledges that they are not covered by Workers' Compensation while engaged in any voluntary on-duty or off-duty activity and that participation in Volunteer activities does not constitute an employee-employer relationship between the volunteer and RELEASEES, including without limitation, skiing and riding at The Summit at Snoqualmie® or its sister resorts.
4. Skiing and riding privileges, as well as ambassador activities, may be revoked at any time due to misconduct or violation of this agreement, including without limitation, any other company policies.

I HAVE CAREFULLY READ, UNDERSTAND, AND VOLUNTARILY AGREE TO THIS ACKNOWLEDGEMENT AND RELEASE OF LIABILITY. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AN AGREEMENT BETWEEN ME AND THE RELEASEES THAT LIMITS MY LEGAL RIGHTS AND I SIGN IT OF MY OWN FREE WILL. I INTEND THIS DOCUMENT TO BE INTERPRETED AS BROADLY AS PERMISSIBLE BY WASHINGTON LAW.

Name: _____

Please Print Legibly

Signature: _____ Date: _____