

Challenge Alaska Adaptive Ski and Snowboard School

Welcome to Challenge Alaska, we look forward to having your group come and ski with us this season! Lessons are based out of our ski in/ski out chalet located at Alyeska Resort in Girdwood, AK.

Your group's lessons will include:

- All equipment needed to stand up ski, sit ski, and snowboard, including adaptive equipment.
- A pre-lesson assessment of individual needs & equipment fitting.
- An all-mountain lift ticket for each individual taking a lesson
- A private lesson on the slopes with volunteer instructors trained by Professional Ski Instructors of America (PSIA) clinicians.
- Day use of our chalet (includes full kitchen) for staging, warm-ups, lunch, snacks, etc. It is a great place for family, teachers, or caregivers to wait and watch the lessons.

2019-2020 Group Leader Check List

___ * **Reply to confirmation email with number of participants and teacher contact information ASAP**

___ * **Roster sent to Challenge at least a week in advance (located in your teacher packet):** Challenge is a volunteer run ski school and will try to accommodate late changes to rosters. Typically we can offer 2 snowboard lessons and 2 sit ski lessons a day. Talk to staff if you need more. Please let us know with as much advance as you can with **any** changes that may be made.

___ * **Completed & checked participant packet day of lesson.** We recommend submitting packets a week in advance. They can be sent to Challenge by email or fax. Please be sure **all required** fields are filled out on participant packet. This includes:

- Name, address, D.O.B., Emergency Contact Information
- **Disability-** This gives our instructors the best idea of how to tailor the lesson to that individual and their needs.
- Any need-to-know medical information: i.e. seizures, blood thinners, sensory loss, flight risk etc.
- The Rental Agreements filled out **In full & signed**. We need accurate shoe size, height (In feet & inches), and age to provide the best fitting and safest settings on the equipment.
- **Both Alyeska Resort & DSUSA waivers must be filled out & signed before any participant is able to go on the snow** *even if student is sledding.
- If a participant is in need of a scholarship, please fill out a request stating the reason as well as the requested scholarship amount. **Submit scholarship requests 30 days prior to lessons.**
- Please have the survey on the back filled out for each participant. This information allows us to apply for grants to help continue offering our program.

___ * **Staff waivers completed:** If any staff or parents are coming along to supervise and ski on hill please fill out the staff participant packet before arriving at Challenge. This will allow students & staff to get out on hill on time. You do not have to fill out the packet if you are not skiing or riding.

Important Group Leader Information

Pricing for the **2019-2020** season are **\$95** for half day lessons and **\$190** for full day lessons. Challenge will not turn away any participant because of inability to pay full price: limited, need-based partial scholarships are available. We encourage participants to pay what they are able to afford to help keep lesson fees low. **If your group is requesting a scholarship to help cover the cost, please contact us 30 days prior to your lessons.**

What to Wear:

All participants **should come dressed for cold weather**; this includes synthetic clothing (no cotton or jeans), hats, gloves, warm socks, winter coats, and snow pants. We have limited amounts of spare clothing at Challenge.

Lesson Times:

December 1st to March 31st:

- AM lessons **10:30a-12:30p**, PM lessons **1:30p-3:30p**.
- Please plan your bus pick-up times to be @ 12:15p-12:30p for AM Lessons, and 3:15p-3:30p for PM lessons.

April Lesson 1st to 20th:

- AM lessons **11a-1p**, PM lessons **2p-4p**.
- Please plan your bus pick-up times to be @ 12:45p – 1 p for AM lessons, and 3:45p-4p for PM lessons.

Please arrive at least 45 min early to allow for equipment fitting and assessment.

On the day of your lesson, please call with any roster changes before departing for Girdwood.

The roads are typically well maintained but buses and vans are encouraged to have studs OR tire chains available when driving here. Feel free to call Challenge or 511 about road conditions.

**426 Crystal Mountain Road, Girdwood 907-783-2925 * Fax 907-783-3207 ski@challengealaska.org
www.challengealaska.org**

Please note each group is given **1 free lift ticket & 1 free rental** for the on-hill supervisor. On-hill supervisors must be a minimum of an intermediate skier or snowboarder. Any subsequent staff rentals are \$30.00 and lift tickets are \$45.00. All staff members who will be skiing or riding must already know how to ski or snowboard.

Please feel free to contact us at any time with any questions you may have concerning your group coming to Challenge. We are in the office 9am-5pm seven days a week.

Thank you and we look forward to your group's visit!!

Fax: 783-3207 or Email: ski@challengealaska.org
 at least 7 days prior to lesson date.

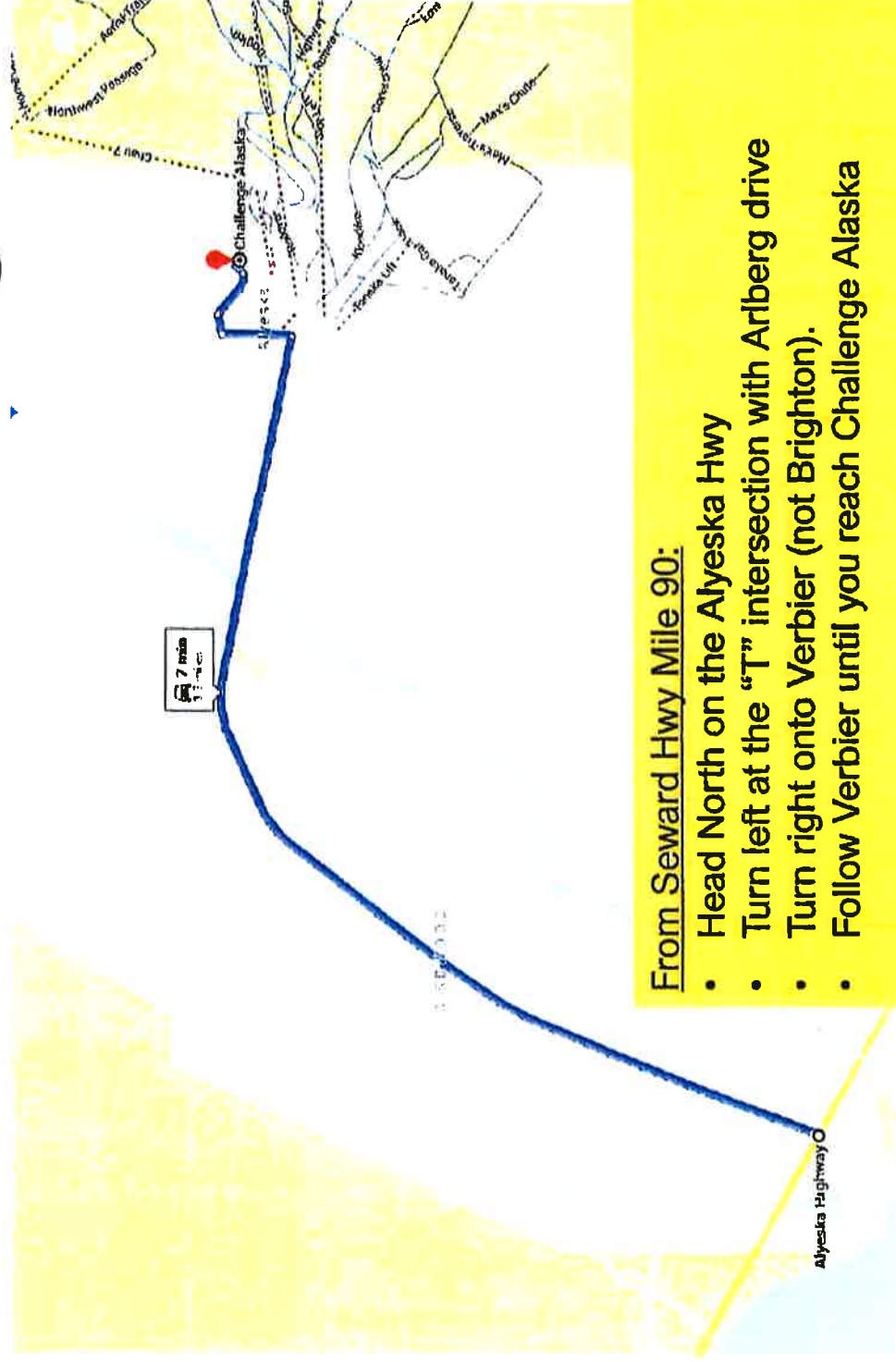
One roster per group per date. Please send individual rosters for each scheduled date.

School/Org:	Lesson Date:	Lead Staff Member & Cell phone number:
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Name	Age	HT in Ft/in	Wt	Shoe size	Disability	ski, snowboard, sit ski
<i>(example) Peter Parker</i>	25	5'9"	175	10	Autism/Cerebral Palsy	Snowboard
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Staff (if skiing)	DSUSA waiver. Alyeska Waiver, and rental agreement required					
1						
2						
3						
4						

Preferred Route to Challenge AK



From Seward Hwy Mile 90:

- Head North on the Alyeska Hwy
- Turn left at the “T” intersection with Arlington drive
- Turn right onto Verbier (not Brighton).
- Follow Verbier until you reach Challenge Alaska

Key Tips:

- Put the chains on the bus before driving up Verbier.
- Do not follow the blue signs to Challenge AK. They take you up a steeper, less maintained road.

2019-2020
CHALLENGE ALASKA PARTICIPANT INFORMATION FORM

Name: _____ D.O.B. ___/___/___
Mailing Address: _____ City: _____
State: _____ Zip: _____ Phone #: Home _____ Cell: _____
Email: _____
Sex: _____ Ht: _____ Wt: _____ Shoe Size: _____
School Group: _____

EMERGENCY CONTACT INFORMATION:

Name: _____ Relationship: _____
Mailing Address (if different than above): _____
City: _____ State: _____ Zip: _____
Phone #: Home: _____ **Emergency:** _____
Current Physician: _____ Phone #: _____

DISABILITY (Required Fields*):

Describe your disability*: _____

Medications*: _____

Check any that Apply:

___ Seizures: Date of last seizure: _____ Type: _____
___ Allergies: Please List: _____
___ Bladder or Bowel Adaptations: Type: _____
___ Shunt _____ Poor Circulation in limbs
___ Diabetes _____ Cardiovascular Problems
___ Visual Loss _____ Endurance: Decreases with activity
___ Sensory Loss _____ Communication Difficulties
___ Respiratory Problems _____ Harrington Rods

Behavior and General Attitudes:

(1.) Normal (2.) Mild – Infrequently (3.) Moderate – Frequently (4.) Severe – Constantly

___ Frustration Tolerance	___ Problem Solving
___ Hostility	___ Slowness of Speech
___ Confusion	___ Spatial Disorientation
___ Anxiety	___ Temper
___ Distractibility	___ Ability to Self-Correct

Provide any additional information to help achieve your skiing goals:

Challenge Alaska Rental Agreement

First Name: _____ Last Name: _____

Address: _____

Phone No. _____

<u>Shoe Size</u>	<u>Height</u>	<u>Weight</u>	<u>Age</u>	Skier Type	I-	I	II	III	III+
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***Please ensure height and weight information are accurate, this determines how we set the skis and is VERY IMPORTANT!**

FOR SHOP USE ONLY

	<u>Length</u>	<u>Visual Indicator Settings</u>		<u>Skier Code</u>
Boots		LT	RT	<div style="border: 1px solid black; width: 100%; height: 40px;"></div>
Skis		LH	RH	

Technicians Signature: _____ Date: _____

Rental and Liability Release Agreement: Please read carefully before signing

1. I accept for use as in the equipment listed on this form, and accept full responsibility for the care of the equipment while it is in my possession.
2. I will be responsible for the replacement, at full retail value, of any equipment rented from Challenge Alaska, but not returned to Challenge Alaska in or damaged beyond repair.
3. I agree to return all rental equipment to this location by the agreed date in clean and operable condition to avoid any additional charges, and to pay full price for any damage to the equipment
4. I have received instruction on the use of this equipment and fully understand its use and function.
5. I have not misrepresented my height, weight, age, or skier type or ability to Challenge Alaska.
6. I verify that the visual indicator settings recorded on this form agree with the numbers appearing in the visual indicator windows of the equipment listed on this form.
7. **I understand that there are inherent and other risks and dangers involved in the sport of skiing, that injuries are a common and ordinary occurrence of this sport, and I freely and voluntarily assume all those risks, and any injuries, whether minor or fatal, that occur during my participation.**
8. **I understand that the ski-boot-binding system which I am renting will not release at all times nor under all circumstances, and may release prematurely, which may result in injury or death. It is not possible to predict every situation in which it will release, and it is, therefore, no guarantee of safety.**
9. I agree to release, hold harmless, indemnify and defend any Challenge Alaska, affiliated and subsidiary organizations, together with all of their respective shareholders, directors, officers, board members, employees, volunteers and agents from any and all loss and damage including any that result from claims of property damage, personal injury, or death caused in any way by the manufacture, marketing, sales, rental, selection, installation, maintenance, adjustment, use or misuse of this equipment, and for any claim based upon negligence, breach of warranty, strict liability, contract, or other legal theory, accepting myself the full and sole responsibility for any and all such damage, injury or death which may result.
10. I am aware that Challenge Alaska offers instruction and education on the inherent danger and risk of skiing, and the duties imposed on skiers under the Alaska Ski Safety Act. For more information, ask any shop attendant.
11. This agreement is governed by the laws of the State of Alaska. If any part of this agreement is determined to be unenforceable, all other parts shall be given full force and effect.

Skier Signature (Guardian if under 18)

Date:

Snowboard Rental Form

Date: _____

Last Name: _____ First Name: _____

Address: _____

Phone No. _____ Local Phone No. _____

Ht: _____ Wt: _____ Shoe Size: _____

CIRCLE ONE:

Regular (left foot forward)

Goofy (right foot forward)

Don't Know

Ability: CIRCLE ONE

Beginner

Intermediate

Advanced

SHOP USE ONLY

Board Length: _____ **cm**

Boot Size: _____

Circle one: Regular Goofy

Stance Degrees: _____

Comments:



LIABILITY RELEASE AND INDEMNIFICATION AGREEMENT

THIS RELEASE AND INDEMNITY APPLIES TO EACH AND EVERY EVENT / RACE / ON HILL TRAINING PROGRAM AT ALYESKA RESORT FOR THE 2019-2020 SKI SEASON

NAME OF PARTICIPANT: _____ AGE: _____

ADDRESS: _____ (Please print) CITY: _____ STATE: _____ (ZIP) _____

PHONE #: _____ EMail: _____

PLEASE READ CAREFULLY * THIS AGREEMENT LIMITS OUR LIABILITY

If participant is under 18 years of age, participant's parent or legal guardian must initial and sign.

I affirm I am physically fit to participate. I release and discharge Alyeska Resort Operations Limited Partnership, doing business as "Alyeska Resort", their owners, parents, affiliated and subsidiary organizations, together with all of their respective shareholders, directors, officers, employees, volunteers and agents (the released parties) from any and all claims, demands, actions and causes of actions, whether for property damage, personal injury, or death, arising from my participation in any aspect of any and all events scheduled to be held at or near Alyeska Resort.

Participant's initials: _____ Parent or Guardian Initials: _____

RELEASE OF LIABILITY: I hereby release Alyeska Resort Operations Limited Partnership, doing business as "Alyeska Resort", their owners, parents, affiliated and subsidiary organizations, together with all of their respective shareholders, directors, officers, employees, volunteers and agents (the released parties), from any and all claims, liability, or causes of action of any kind, whether known or unknown, whether based on **negligence** or otherwise, for property damage, personal injury, or death, arising from or related to the participant's participation in any and all events scheduled to be held at or near Alyeska Resort. **I understand and agree that I may be participating in an event or competition which will include aeriels, jumps, inverted aeriels, back flips, twists and turns. I understand that these maneuvers are inherently dangerous and risky and could result in my serlous injury or death. I accept this risk and understand the consequences of my actions.**

Participant's initials: _____ Parent or Guardian Initials: _____

INDEMNIFICATION: I hereby agree to indemnify, defend and hold harmless, Alyeska Resort Operations Limited Partnership, doing business as "Alyeska Resort", their owners, parents, affiliated subsidiary organizations, together with all of their respective shareholders, directors, officers, employees, volunteers and agents (the released parties), against any claim, liability, or cause of action of any kind, whether known or unknown, whether based on **negligence** or otherwise, for property damage, personal injury or death, made against the indemnified parties and arising from or related to the participant's participation in any and all events or competitions at or near Alyeska Resort. I accept full responsibility for all medical expenses arising from or related to the participant's participation in any and all events at or near Alyeska Resort.

Participant's initials: _____ Parent or Guardian Initials: _____

COVENANT NOT TO SUE: I hereby covenant and agree I will never bring, authorize to be brought, or otherwise participate in any claim, suit, or cause of action of any kind, whether known or unknown, whether based on **negligence** or otherwise, for property damage, personal injury, or death, against Alyeska Resort Operations Limited Partnership, doing business as "Alyeska Resort", their owners, parents, affiliated and subsidiary organizations, together with all of their respective shareholders, directors, officers, employees, volunteers and agents (the covenantees), arising from or related to the participant's participation in any and all events at or near Alyeska Resort.

I HAVE READ THE ASSUMPTION OF RISK, RELEASE OF LIABILITY, INDEMNIFICATION AND COVENANT NOT TO SUE. I UNDERSTAND AND AGREE TO THE PROVISIONS.

Date _____ Participant's Signature: _____ Parent or Guardian Signature: _____

Disabled Sports USA Waiver & Release of Liability Agreement

Disabled Sports USA, and its affiliated Chapters (“Released Parties”) are non-commercial, not for profit activity providers. The purpose of this Disabled Sports USA Waiver & Release of Liability Agreement is to exempt, waive, and relieve Released Parties from any and all liability for any harm, wrongful death, personal injury, property damage, claim or cause of action, including, but not limited to liability arising from the negligence of Released Parties. “Released Parties” include Disabled Sports USA, Challenge Alaska, and their affiliates, successors, predecessors, parents, subsidiaries, owners, representatives, administrators, directors, officers, agents, coaches, employees, contractors, assigns, and volunteers; other participants, sponsoring agencies, sponsors, and advertisers; and, if applicable, the owners, operators, and lessors of premises on which the activities or events take place.

In consideration of the undersigned Participant being allowed to participate in any way in Disabled Sports USA and/or Challenge Alaska related events and activities, the Undersigned (“Undersigned” means the Participant or the Participant’s parent, legal guardian, or legal representative when the Participant is under the age of 18 or legally incapacitated) agrees and acknowledges as follows:

- 1. Risks of Activity.** Participant will be taking part in activities that can be hazardous and involve the risk of physical injury and/or death. The activities are inherently dangerous and Undersigned fully realizes the dangers of participating in the activities. The dangers and risks of the activities include, but are not limited to the condition of the premises and equipment, and the acts, omissions, representations, carelessness, and negligence of the Released Parties. Recognizing the risks and dangers, the Undersigned voluntarily chooses for Participant to participate in the activities and expressly assumes all risks and dangers of the participation in the activity, whether or not described above, known or unknown, inherent, or otherwise.
- 2. Release and Indemnification.** Undersigned (a) unconditionally releases, forever discharges, and agrees not to sue the Released Parties for any claims or causes of action for any liability or loss of any nature, including personal injury, death, and property damage, arising out of or relating to Participant’s participation in any Disabled Sports USA/ Challenge Alaska events or activities or the Participant’s presence on or travel to the premises where such events or activities take place, including, but not limited to claims of negligence, breach of warranty, and/or breach of contract the Undersigned may or will have against the Released Parties; and (b) agrees to indemnify, defend, and hold harmless the Released Parties from and against any liability or damage of any kind and from any suits, claims, or demands, including legal fees and expenses whether or not in litigation, arising out of, or related to, Participant’s participation in such events or activities or the Participant’s presence on or travel to the premises where such events or activities take place.
- 3. Helmet Use.** Undersigned agrees that Participant shall use a helmet when participating in the following activities: Alpine skiing, cycling, equestrian, ice hockey, outdoor rock climbing, snowboarding, white water kayaking, white water river rafting, and any other activity when directed by Released Parties. Undersigned understands that a

helmet is in no way a guarantee of safety and that no helmet can protect the wearer against all foreseeable impacts to the head, and that the activities can expose the Participant to forces that exceed the limits of protection provided by a helmet. Undersigned agrees to assume full responsibility for complying with this paragraph and that Released Parties shall not be liable for any injury or damages resulting from Participant’s failure to use a helmet.

4. Medical Treatment. Undersigned understands that the Released Parties do not have medical personnel available at the location of the activities. Undersigned hereby grants the Released Parties permission to administer first aid or to authorize emergency medical treatment, if necessary. Undersigned understands and agrees that any such action by the Released Parties shall be subject to the terms of this agreement and release, including any liability arising from the negligence of the Released Parties when administering first aid or authorizing others to do so. Undersigned understands and agrees that the Released Parties do not assume responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment.

5. Miscellaneous. Undersigned agrees (a) Participant will not engage in any activities prohibited by any applicable laws, statutes, regulations, and ordinances; (b) this Agreement shall be governed by the laws of the State of Alaska and the exclusive jurisdiction and venue for any claim shall be located in the state courts located in Municipality of Anchorage County, AK; (c) this Agreement shall be binding upon the subrogors, distributors, heirs, next of kin, executors, and personal representatives of the Undersigned; (d) this Agreement shall be construed as broadly as permitted by applicable law; and (e) that in the event that any clause or provision of this Agreement shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Agreement.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND ITS CONTENTS. I AM AWARE THAT I AM RELEASING LEGAL RIGHTS THAT OTHERWISE MAY EXIST. BY SIGNING BELOW, I HEREBY REPRESENT THAT I AM AT LEAST 18 YEARS OF AGE AND FULLY COMPETENT TO SIGN THIS AGREEMENT ON MY OWN BEHALF.

Participant’s Signature	Participant’s Name (please print clearly)	Date

FOR PARTICIPANTS UNDER THE AGE OF 18 OR LEGALLY INCAPACITATED

Undersigned parent, or legal guardian, or legal representative acknowledges that he/she is not only signing this Agreement on his/her behalf, but that he/she is also signing on behalf of the minor or legally incapacitated adult and that the minor or the legally incapacitated adult shall be bound by all the terms of this Agreement. Additionally, by signing this Agreement as the parent, or legal guardian, or legal representative of a minor or legally incapacitated adult, the parent, legal guardian, or legal representative understands that he/she is also waiving rights on behalf of the minor or legally incapacitated adult that the minor or legally incapacitated adult otherwise may have. The Undersigned parent, or legal guardian, or legal representative agrees that, but for the foregoing, the minor or legally incapacitated adult would not be permitted to participate in the activities. By signing below, I hereby represent that I am the parent, legal guardian, or legal representative of a minor, or legally incapacitated adult Participant and that I have the authority to sign on the Participant’s behalf.

Minor’s DOB	Parent/Legal Guardian or Representative Signature	Parent/Legal Guardian or Representative Name	Relationship	Date

Disabled Sports USA Media Release Agreement

Disabled Sports USA, and its affiliated Chapters ("Released Parties") are non-commercial, not for profit activity providers. "Released Parties" include Disabled Sports USA, Challenge Alaska and their affiliates, successors, predecessors, parents, subsidiaries, owners, representatives, administrators, directors, officers, agents, coaches, employees, contractors, assigns, and volunteers; other participants, sponsoring agencies, sponsors, and advertisers; and, if applicable, the owners, operators, and lessors of premises on which the activities or events take place.

MEDIA RELEASE FORM

MEDIA/PHOTO WAIVER: Undersigned authorizes and gives full consent to Released Parties to copyright and/or publish for public view any and all photographs, digital recordings, videotapes, and/or film in which Participant appears. Undersigned agrees that Released Parties may transfer, use, or cause to be used, these digital recordings, photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, television programs, and internet without limitations or reservations.

Participant's Signature	Participant's Name (please print clearly)	Date

FOR PARTICIPANTS UNDER THE AGE OF 18 OR LEGALLY INCAPACITATED

Undersigned parent, or legal guardian, or legal representative acknowledges that he/she is not only signing this Agreement on his/her behalf, but that he/she is also signing on behalf of the minor or legally incapacitated adult and that the minor or the legally incapacitated adult shall be bound by all the terms of this Agreement. Additionally, by signing this Agreement as the parent, or legal guardian, or legal representative of a minor, or legally incapacitated adult, the parent, legal guardian, or legal representative understands that he/she is also waiving rights on behalf of the minor or legally incapacitated adult that the minor or legally incapacitated adult otherwise may have. By signing below, I hereby represent that I am the parent, legal guardian, or legal representative of a minor, or legally incapacitated adult Participant and that I have the authority to sign on the Participant's behalf.

Minor's DOB	Parent/Legal Guardian or Representative Signature	Parent/Legal Guardian or Representative Name	Relationship	Date

Challenge Alaska Scholarship Request Form

Name	_____	Date	_____
Street Address	_____		
City	_____	_____	_____
State	_____		
Zip code	_____		
Phone	_____		
Email	_____		

Program you are requesting a scholarship for	_____
Cost \$	_____
Amount of Scholarship you are requesting \$	_____
Reason	_____

For Staff Completion Only

Date Met with Challenge Alaska Staff	_____
Staff notes	_____
Approved <input type="checkbox"/> Denied <input type="checkbox"/> Staff Signature	_____
Executive Directors Signature	_____

PLEASE COMPLETE THIS FORM IT IS IMPORTANT!

You are participating in Challenge Alaska Programs at a subsidized rate. We need the information provided on this form to keep the cost to you as low as possible. Failure to complete this form may result in denial of participation. This form does not require your name and will not be connected to you.

Age: _____

Gender: Male Female (circle one)

Ethnicity: Caucasian	_____	Family Income: Under \$29,000	_____
African American	_____	29,601-47,360	_____
Hispanic	_____	46,361-60,384	_____
Asian	_____	Above 60,384	_____
Pacific Islander	_____	Unknown	_____
Alaska Native	_____		
Multi-Rethnic	_____		
Other	_____ (write in)		
Unknown	_____		

Location of Residence: Anchorage _____
Alaska outside Anchorage _____
State other than Alaska _____
Outside the U.S. _____

Disability (mark all that apply):

Developmentally Disabled	_____	Alzheimer's/Dementia	_____
Physically Disabled	_____	Traumatic Brain Injury	_____
Visually Impaired	_____	Mental Illness	_____
Hearing Impaired	_____	Other	_____