

CRYSTAL MOUNTAIN
2020-2021 School Program
Single Trip Application

(Please complete one form for each participant)

School:	_____
Day:	_____

Participant Name _____

School Advisor _____ Parents Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Alternate Phone _____

Email _____

**Lift, Instruction,
Rental**

\$35 all ages

**For Single Trip Rates please have the students' parents fill this out and have the student bring this with, if they need to rent equipment they will need to bring a continuing rental liability (only one per season).
Rental Equipment and lessons require advance reservation
See your school program advisor for details.**

Please make checks payable to: **CRYSTAL MOUNTAIN (include DL # and Phone # on check.)**
Forms must be returned to your group's Advisor prior to your visit to Crystal Mountain.

Age: _____	Shoe Size: _____
Weight: _____	Height- Feet: _____ Inches: _____
<u>Please Check One:</u>	
My child is renting equipment: YES or NO	
My child is renting: _____ skis	Skier level: _____ I- Beginner
	_____ II- Intermediate
My child is renting: _____ snowboard	
My child is renting a helmet: YES or NO	

Parent name: _____ Date: _____

Parent Signature: _____ Date: _____