

**SKI COOPER SKI PATROL (SCSP)
SERVICE, CARE, SAFETY AND RESPONSIBILITY**



Bring a printed copy for signature with you on the day of your evaluation.

NATIONAL SKI PATROL SYSTEM AND COOPER HILL SKI AREA, INC. RELEASE FOR THE 2025

SKI COOPER SKI PATROL CANDIDATE TEST, Date: _____, at Ski Cooper, CO.

I, _____, agree that I am voluntarily participating in this SCSP Ski Patrol Candidate Test. I certify that I am 18 years of age or older. I understand that the SCSP Ski Patrol Candidate Test may involve skiing on slopes up to "Expert/Black Diamond/DOUBLE BLACK DIAMOND" Level. I realize there are inherent risks in this type of activity including changing weather conditions, changing snow surface conditions, ice, bare spots, rocks, stumps, trees and the possibility of collisions with man-made and natural objects, snowmobiles and other vehicles, other skiers, and equipment failure and that such activity can be dangerous and can result in serious injury or death. I understand that at all times while on Ski Cooper's property, I fall under the definition of a "skier" according to the Colorado Ski Safety Act. I knowingly assume the risk of participation and understand I can withdraw from this SCSP Ski Patrol Candidate Test at any time.

I understand that by participating in this SCSP Ski Patrol Candidate Test I may also encounter additional risks not inherent to a normal participant to the sport of skiing. I agree to personally assume all of these risks. I also agree that I will rely solely on my own judgment regarding my personal safety and ability with regard to the terrain, circumstances and conditions in which I may be placed upon or asked to perform or accomplish the tasks involved in SCSP Ski Patrol Candidate Test, and that I will decline to perform any activities if I believe I am placing myself in an unsafe situation or subject to possible injury or death if I proceeded.

I, the Undersigned, do hereby acknowledge and agree to waive any right I might have to file a lawsuit for any property damage or loss, injury, or death resulting from my participation in this SCSP Ski Patrol Candidate Test and I hereby remise, release, and forever discharge Cooper Hill Ski Area, Inc.; the National Ski Patrol System, Inc.; the USDA Forest Service; the County of Lake, Colorado; and their members, employees, directors, officers, representatives, assignees, shareholders, agents, insurance carriers, and affiliated companies (jointly, "released parties"), and I agree that no one else may file a lawsuit in my name related to my participation in this SCSP Ski Patrol Candidate Test. I, the UNDERSIGNED, AGREE TO HOLD HARMLESS AND RELEASE EACH AND EVERY RELEASED PARTY FROM ANY AND ALL LIABILITY and/or claims for injury or death to persons or damage to property arising from my participation in the Activity. If any part of this Release shall be determined to be unenforceable, all other parts shall be given full force and effect. If any suit is brought it WILL BE GOVERNED BY THE LAWS OF THE STATE OF COLORADO and EXCLUSIVE JURISDICTION thereof will be in the DISTRICT COURT OF LAKE COUNTY, COLORADO. Cooper Hill Ski Area, Inc. may recover any and all legal fees resulting from any suit filed.

Participant Signature: _____ Date: _____

Participant Name: (printed) _____

Address: _____ Phone: _____

City: _____ State: _____