

CATAMOUNT TRAIL ASSOCIATION

Participant Liability Waiver Form

Multi-Day Tours

Effective for all CTA MDTs within one year from your signature date

Please read before registering for a MDT. We encourage all participants to register through our website at catamounttrail.org. **If you are using this waiver to register through the mail**, please include your donation of \$25 for 1-3 days of skiing and \$50 for 4-8 days of skiing. Please send to:

Catamount Trail Association
1 Mill St. Suite 350
Burlington, VT 05401

I hereby release the Catamount Trail Association, its officers, members, tour leaders, volunteers, sponsors and host sites of any liability for personal injury resulting from my participation in any CTA sponsored event during the above period. I understand that there are inherent risks associated with cross-country skiing in wilderness settings, such as snowmobile encounters on trails shared with them, fallen trees hidden under snow, icy conditions and steep terrain that can make ascents and descents treacherous, and I assume all responsibility for any injuries stemming from my participation in these events. I agree to abide by the instructions of the CTA's volunteer Tour Coordinators and Leaders and those designated by them.

I am a current CTA Member. **Yes**

I have read descriptions of relevant CT sections in the Guidebook or on the CTA website. **Yes**

I have read and understand the Recommended Equipment List and Guidelines for Skills and Fitness on the CTA website. **Yes**

I accept the MDT skier responsibilities described on the CTA website. **Yes**

I understand that at the end of the first or second day the Tour Coordinator or his/her representative may tell skiers who are having difficulty or can't keep pace with the group they must leave the tour. **Yes**

Name (Print): _____

Email: _____

Phone ((home and cell): _____

Address: _____

Signature: _____ Date: _____

Please indicate the specific tour and dates you will be skiing below: