



Mammoth Mountain Mid-Week Drive-Ups

Mark your calendar now with these **2024** dates. Come experience your favorite California mountain mid-week, avoiding the weekend crowds.

Group leader Bill B. will arrange double occupancy condo accommodations for 4 nights with a bathroom for each 2 people. Bill will designate condo mates and nobody will be assigned to top bunks. Access to shuttle service will be considered when selecting condos.

We drive up Sunday, check-out Thursday. Parking at condos is limited so we do our best to ride share. Bill can help organize carpools.

Typically, we make some dinners together in the condo and split the cost. Let Bill know if you are willing to take the lead for one of the group dinners. It is customary for those who do not cook to help with clean-up duties. Everyone's on their own for at least 1 dinner. Breakfasts, lunches and beverages are not provided.

Cost for each trip has been set at **\$425** (subject to change upon notice). Condo needs will be determined about a month prior to each trip date based on paid reservations. Depending on the actual price of the condo and group dinner costs, you may get some rebate \$\$ after the trip.

Cancellation Policy: NO REFUND if you are unable to make the trip unless you can be replaced by another member of appropriate gender from a wait list, if any. Although Bill will help find a replacement for your spot, he expects you to be actively involved in the networking process.

You must be a FVSC member.

Contact group leader Bill B. to reserve your space or for more information.

fvsc_mammoth@fountainvalleyskiclub.org 562-947-6459

Make your \$425 check **payable to FVSC** and **mail with your signed waivers / cancellation policy to Bill's residence**. If you need the address, email Bill or give him a call.

January 2024						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

February 2024						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	

March 2024						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

April 2024						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

Mammoth Dates

Jan 7 – 11	Reserve by Dec 2	Payment must be received by Dec 9
Feb 4 – 8	Reserve by Jan 6	Payment must be received by Jan 13
Mar 24 – 28	Reserve by Mar 2	Payment must be received by Mar 9

FVSC Snowmass, CO

Mar 10 – Mar 17

Holidays

Jan 1	New Year's
Jan 15	MLK
Feb 11	Super Bowl
Feb 19	Presidents' Day
Mar 31	Easter

IKON Base Pass Blackout Dates

✗ Jan 13 & 14 Feb 17 & 18

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Cancellation Policy: No refunds unless you can be replaced by a participant of appropriate gender from a wait list. All non-recoverable costs will be forfeited if no replacement is found. Membership dues are non-refundable. Travel insurance is recommended. If you have been exposed to COVID-19 or experience any medical symptoms (even slight) associated with COVID-19 you are expected to self-report to the Mammoth trip coordinator and not participate in the trip (even if signed up and paid).

I HAVE BEEN INFORMED OF CANCELTION POLICIES AND PENALTIES AND AGREE TO THE TERMS.

Signature of Adult Participant _____ Name of Adult Participant (Please Print) _____ Date _____

SPORT PARTICIPANT RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS ASSUMPTION OF RISK AND INDEMNITY AGREEMENT Please read and be certain you understand the implications of signing.

Express Assumption of Risk Associated with Sport, Venue Use and Related Activities.

I, _____ do hereby affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with FOUNTAIN VALLEY SKI CLUB activities, transportation of equipment related to the activities, and traveling to and from activity sites in which I am about to engage. Inherent hazards and risks include but are not limited to:

- 1. Risk of injury from the activity and equipment utilized is significant including the potential for broken bones, severe injuries to the head, neck, and back or other bodily injuries that my result in permanent disability and death.
2. Possible equipment failure and/or malfunction or misuse of my own or others' equipment.
3. I AGREE THAT I WILL WEAR APPROVED PROTECTIVE GEAR AS DECREED BY THE GOVERNING BODY OF THE SPORT I AM PARTICIPATING IN. However, protective gear cannot guarantee the participant's safety. I further agree that no helmet can protect the wearer against all potential head injuries or prevent injury to the wearer's face, neck or spinal cord.
4. Variation and/or steepness of terrain, variation or changes in surfaces including but not limited to snow surfaces, ice, bare spots, rocks, stumps, debris, cliffs, trees, fences, posts, trees, light poles, signs, buildings, roads, walkways, ramps, rails, stairs, pyramids, manual pads, bowls, half-pipes, jumps, padded and nonpadded barriers, other persons, and other natural and man-made hazards.
5. My own negligence and/or the negligence of others, including but not limited to operator error and guide decision making including misjudging terrain, weather, riding surfaces or other obstacles.
6. Exposure to the elements and temperature extremes may result if frost nip, frost bite, heat exhaustion, heat stroke, sunburn, hypothermia and dehydration.
7. Dangers associated with exposure to natural elements include but are not limited to avalanche, rock fall, inclement weather, thunder and lightning, severe and or varied wind, temperature and other weather conditions.
8. Accidents or illness occurring in remote places where there are no available medical facilities.
9. Fatigue, exhaustion, chill, and/or dizziness, which may diminish my/our reaction time and increase the risk of accident.
10. Impact or collision with other athletes, spectators, facility employees, pedestrians, motor vehicles, and cyclists.

*I understand the description of these risks is not complete and unknown or unanticipated risks may result in injury, illness, or death.

Release of Liability, Waiver of Claims and Indemnity Agreement

In consideration for being permitted to participate in the above described activity(ies) and related activities, I hereby agree, acknowledge and appreciate that:

- 1. I HEREBY RELEASE AND HOLD HARMLESS WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY NEGLIGENCE OR OTHERWISE, the following named persons or entities, herein referred to as releases: FOUNTAIN VALLEY SKI CLUB.
2. To release the releasees, their officers, directors, employees, representatives, agents, and volunteers from liability and responsibility whatsoever and for any claims or causes of action that I, my estate, heirs, survivors, executors, or assigns may have for personal injury, property damage, or wrongful death arising from the above activities whether caused by active or passive negligence of the releasees or otherwise. By executing this document, I agree to hold the releasees harmless and indemnify them in conjunction with any injury, disability, death, or loss or damage to person or property that may occur as a result of my engaging in the above activities.
3. By entering into this Agreement, I am not relying on any oral or written representation or statements made by the releasees, other than what is set forth in this agreement.
4. This agreement shall apply to any and all injury, disability, death, or loss or damage to person or property occurring at any time after the execution of this agreement.

This release shall be binding to the fullest extent permitted by law. If any provision of this release is found to be unenforceable, the remaining terms shall be enforceable.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND THAT I HAVE GIVEN UP LEGAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature of Adult Participant _____
Name of Adult Participant (Please Print) _____
Date _____

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

Please read and be certain you understand the implications of signing.

Express Assumption of Risk / Waiver of Liability / Indemnification Agreement.

In consideration of being allowed to participate in FOUNTAIN VALLEY SKI CLUB events and activities, the undersigned acknowledges, appreciates, and agrees that:

Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I experience symptoms or observe any hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS FOUNTAIN VALLEY SKI CLUB their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct events and activities ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL LEGAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature of Adult Participant _____
Name of Adult Participant (Please Print) _____
Date _____

EMERGENCY CONTACT

Who to contact in case of emergency?

Name _____
Relationship _____
Number _____