



Sponsor-A-Youth Learn-To-Ski Program

Saturday, February 25, 2023

6:00am, Clark Commons Shopping Plaza 1255 Raritan Rd., Clark, NJ

Trip Leader: Kevin Armstrong 908-623-9007

Rates/Date Subject to Change

Lift Ticket: Youth/Adult (*any age*) \$85 x ____ = \$ ____

Lift Ticket: Senior(70+)/Military \$75 x ____ = \$ ____

Beginner Ski Package: \$115 x ____ = \$ ____
(ski/snowboard lesson, equipment, lift, helmet)

Helmet Rental \$15 x ____ = \$ ____

Bus (*incl. snacks & beverages*) \$30 x ____ = \$ ____

Equipment Rental, Group Lesson & Snow Tubing (*go online to purchase*)
<https://mountaincreek.com>



Click Here to Send Payment Online: <https://www.eventbrite.com/e/jersey-ski-sports-mountain-creek-sponsor-a-youth-learn-to-ski-program-tickets-482759987117>

(Membership is a must if you want to go on any of JSSI's trips) *MEMBERSHIP HAS ITS PRIVILEGES*****

Membership dues -Payment Online: <https://www.eventbrite.com/e/jersey-ski-sports-membership-dues-20222023-tickets-480883805407>

Send checks payable to: Jersey Ski & Sports, c/o Mountain Creek Trip, P.O. Box 1004, Newark NJ 07101

DISCLAIMER. Jersey Ski & Sports, Inc. acknowledges with you that activities of the organization are of a physical nature that recommends prudence in participation and advice from a physician regarding any normal or limited involvement. Neither Jersey Ski & Sports, Inc. or its agents shall be responsible for any loss, personal injury, death or damages incurred in conjunction with any activities sponsored by it or in conjunction with any other persons. Any person participating with Jersey Ski & Sports, Inc. does so at their own risk. This agreement is intended to bind the participant, his heirs, executors and administrators and assigns forever. The disclaimer shall apply to all present and future activities of the Jersey Ski & Sports, Inc. Receipt of payment acknowledges acceptance of disclaimer. No checks accepted at bus. Payment requested four weeks before departure. JSSI, P.O. Box 1004, Newark NJ 07101-1004.

Name(s)/Child _____

Name/Parent or Guardian _____

Address _____

City, State, Zip _____

Phone _____

E-mail _____