



# 2009-2010 Echo Mountain Season Pass Purchase Form

**\*If you are purchasing more than one Pass, use separate forms for each Pass Holder.**

Racing season pass

COST 139.00 PER ATHLETE

PASS HOLDER FIRST NAME: \_\_\_\_\_

PASS HOLDER LAST NAME: \_\_\_\_\_

GENDER: Male / Female

PASS HOLDER BIRTHDATE: \_\_\_\_\_

PASS HOLDER PHONE #: \_\_\_\_\_

PASS HOLDER EMAIL: \_\_\_\_\_

PASS HOLDER ZIP CODE: \_\_\_\_\_

### Please read the following Terms and Conditions of your 09-10 Season Pass purchase:

This purchase is for an Echo Mountain Unlimited 2009-2010 Season Pass. Season Passes are valid for the 2009-2010 season only, no blackout days. Pass Holder must come to Echo to have the Pass photo taken and to have the Pass printed, as applicable. Pass Holder will not get the Pass or anything else from us in the mail. To avoid potential problems, insure that "Pass Holder Name" is the name of the person who will be using the Pass. Incorrect or missing information cannot be processed. Echo Mountain is not responsible for lost or stolen passes. Passes cannot be transferred to another person or for a subsequent ski season.

Season Passes are non transferable and non refundable under ANY circumstances. NO EXCEPTIONS. All Season Pass purchases are final.

Thank you for choosing Echo Mountain and have a great season!

**I, (print first and last) \_\_\_\_\_ acknowledge that I have carefully read the Terms and Conditions of the 2009-2010 Echo Mountain Season Pass purchase and understand its contents. If I am purchasing the Season Pass(es) for (an)other individual(s), I acknowledge that I am responsible for each Pass Holder's understanding of these Terms and Conditions as well.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

NAME ON CREDIT CARD (\*exactly how it appears): \_\_\_\_\_

BILLING ADDRESS (\*must match billing address on credit card used):

STREET: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

BILLING PHONE NUMBER: \_\_\_\_\_

### FOR ECHO USE ONLY:

\*ATTACH RECEIPT TO BACK OF FORM

PAYMENT TYPE (circle):      VISA      MC      DISCOVER      AMEX      CHECK      CASH

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION (month/year): \_\_\_\_\_      CVV CODE (3 or 4 digit code): \_\_\_\_\_

CO DRIVER'S LISCENCE # (checks only): \_\_\_\_\_

PRICE OF SEASON PASS: \_\_\_\_\_ x QUANTITY: \_\_\_\_\_ = TOTAL \$: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

EMPLOYEE SIGNATURE: \_\_\_\_\_