



2016-2017 SEASON PASS APPLICATION

LAST NAME _____ FIRST NAME _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

* Sign me up to receive news and special offers from Peek'n Peak & Scott Enterprises. Do Not Sign me up.

DATE ENTERED _____ DATE PRINTED _____ CHANGE OF ADDRESS NEW PASS HOLDER

***DO YOU WISH TO PURCHASE PASS INSURANCE? YES NO

PASS HOLDER NAME(S)	DATE OF BIRTH	FULL SEASON \$725	SPOUSE \$575	STUDENT / SENIOR FULL \$445	WEEKDAY SEASON \$395	PEAK FIVE \$236	8 WEEK LESSONS (see below) \$125	8 WEEK SKI RENTAL \$119	8 WEEK BOARD RENTAL \$119	CROSS COUNTRY \$85	PASS INSURANCE \$25	TOTAL

8 WEEK LESSONS

TOTAL DUE:

CREDIT CARD PAYMENTS CIRCLE ONE: VISA MC Disc AmEx

Acct.#

Exp. Date _____

Name on Card _____

Signature _____

Check (#) _____ Make checks payable to Peek'n Peak Resort

Peak Charge _____

CHOOSE A DAY

- SUNDAY
- MONDAY
- TUESDAY
- WEDNESDAY
- THURSDAY
- FRIDAY
- SATURDAY

CHOOSE A LESSON TYPE

- SKI
- SNOWBOARD

CHOOSE A TIME

- 10:30AM 4:30PM
- 1:30PM 5:30PM
- 3:30PM 6:30PM

BY SIGNING THIS FORM YOU AGREE TO THE TERMS AND CONDITIONS ON THE REVERSE.



SIGNATURE/PARENT OR GUARDIAN IF UNDER 18

PRINT NAME

DATE