PHOENIX MOUNTAIN ALPINE SKI SOCIETY
2017 - 2018 SEASON PASS APPLICATION

Family Name _____

Phone _____

Mailing Address: _____

Email Address: _____

Please check if you would like to receive a monthly e- newsletter ☐

Please circle one: Grand Forks Area C Area D Area E Other

(This information helps us in our funding applications)

* Early Bird Sale ends Oct. 31, 2017
* See overleaf for rates and instructions.

First Names	Age	Pass Cost

Office Use Only				
Pass #	Photo	Waiver	Ent	Lam

Subtotal	
Add 5% GST	
Total Season Pass	
Total Paid	

Full Payment must be postmarked no later than October 31, 2017 to qualify for the "Early Bird" Price

November 31, 2017 to qualify for the "Pre-Season" Price

Payment Method ☐ Cheque ☐ Visa ☐ MC ☐ e-Transfer (Send to skiphoenix@gmail.com)

Card #: _____

Expiry Date _____ **Cardholder Name (please print)** _____

Signature of Cardholder _____

Make cheques payable to Phoenix Mountain Alpine Ski Society (GST #119370328)

* Limit of 2 adult passes per family
* Family members must be direct legal family, living in one household.
* Applicant's age is determined as of December 31, 2017
* Season passes are non-refundable and non-transferable.