

Box 204, Salmo, B.C. VOG 1Z0 Ph.250-357-2323 email: info@skisalmo.com

2025 Season Pass Registration Form Early Bird Discount on passes purchased before November 1st, 2024

Date: _						
Last Name:			First Name:	First Name:		
Mailing	g Address:		Postal Code:			
Phone 1	Number:		Email			
Pass H	older Name		Birth date (m/d/	y) Age	Pass amt	
1.						
2.						
3.						
4.						
5.						
			Total:	<u> </u>		
	ategories and cut off dates are the time of purchase.	e determined as of Decemb	per 1, 2022 ID will be requi	red for pr	oof of age & family member-	
Liabi	Passholder or Guardian lity, Waiver of Claims, Season Pass pickup.	Assumption of Risks a	and Indemnity Agreem	ent (the	ed to sign the Release of "Release Agreement+)	
Initia	l to acknowledge you have	Read and Agree to the R	elease Agreement	_		
	Mail Completed fo		B.C. VOG 1ZO or email to ed before November 1st, 20		kisalmo.com	
Pay	ment Method	Cheque Visa	Mastercard Cash	Debit	(Western Financial)	
Cheque	es payable to Salmo Ski Club)				
Cardho	older Name:		Expiry d	ate (m/y)	/ CVC	
Card n	umber:		Signature			
					_	
	OFFICE USE ONLY					
	Purchased Date	Payment Proce	essed Date Me	mbership	Processed Date	