

# Pelham Parks and Recreation

6 Village Green, Pelham, NH 03076

Phone: 603-635-2721

Email: [recreation@pelhamweb.com](mailto:recreation@pelhamweb.com)

Fax: 603-508-3094

## Pats Peak Ski/Snowboard Program 5 Thursdays after school January 8<sup>th</sup> – February 5, 2026

**Cost: \$205/per student for bus transportation and administrative costs.  
You must also register at Pats Peak.**

Participant Name: \_\_\_\_\_ Age as of 1/1/26: \_\_\_\_\_

Address: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Parent Email address: \_\_\_\_\_ Student Grade: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work/Cell Telephone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work/Cell Telephone: \_\_\_\_\_

This is a chaperoned recreation after school program for skiing and snowboarding involving a high level of physical activity. Skiing and snowboarding pose a variety of risks to participants by the strenuous level of activity. These risks include but are not limited to bumps, bruises, cuts, abrasions, broken bones, concussions, heart attacks and even death. Because of the inherent risks and extensive physical activity involved, we advise that all participants be in good physical condition. Any limitations regarding physical capabilities should be made known to the Pelham Parks and Recreation Department.

It is highly recommended that all participants wear weather appropriate and safe attire and accessories including but not limited to winter jackets, hats, gloves or mittens, snow pants and helmets. No scarves allowed.

I have read and understand the information provided above. I have noted any physical or medical conditions the participant has which might affect his/her participation. He/she meets the standards required for participation and will have the necessary equipment, which will be in good working condition. I assume all the risks normally are incidental to the nature of this activity, including risks which are not specifically foreseeable. I will follow the rules and regulations provided by the chaperones and Pats Peak.

I, the undersigned, hereby agree to release, indemnify, save and hold harmless the Town of Pelham, the Parks and Recreation Dept., its employees, agents, representatives, chaperones, and volunteers, from any and all liability, actions, causes of actions, debts, claims or demands of any kind for property damage or personal injury resulting from failure to obey safety regulations and directions of the activity leader or resulting from the exercise of judgment by the leader in good faith response to emergencies and exigencies which occur during the activity; provided, however, that nothing contained herein shall excuse any of the leaders to act with reasonable care for the safety of the participant during the course of the activity appropriate to the circumstance.

You have my permission to have a physician attend to my son/daughter, if it is deemed necessary, during his/her participation in the above activity. I give my permission for any videotaping or other photographs taken in which my child/ren may appear and understand that Pelham Parks and Recreation may remove any child from the program as it deems necessary concerning the zero-tolerance policy of inappropriate behavior.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Parent/Guardian signature if under 18

Do you have a season pass? **Circle: YES / NO**

Do you require rentals? **Circle: YES / NO**

Did you complete an emergency form? **Circle: YES / NO**

I will chaperone. **Circle: YES / NO**

\*Chaperones receive complimentary ski lift pass while chaperoning. All chaperones are required to travel on bus with students