

		ARRIVAL:	1ST SKI DAY:	LAST SKI DAY: ____/____/____
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NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ LOCAL LODGING: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

TIME: \_\_\_\_\_

INITIALS: \_\_\_\_\_

<b>A</b>	NAME: _____	HEIGHT: ____ft ____in	WEIGHT: ____lbs	BOOT/SHOE SIZE: ____
	SKIER TYPE:    I    II    III	AGE ____ Male Female	DAMAGE INSURANCE:   YES   NO	

SKIS - CM - #	BOOTS - SIZE - #	MM	CODE	L	VIS	R	P	TI	OUT	IN	DAYS	Q	AMOUNT

<b>B</b>	NAME: _____	HEIGHT: ____ft ____in	WEIGHT: ____lbs	BOOT/SHOE SIZE: ____
	SKIER TYPE:    I    II    III	AGE ____ Male Female	DAMAGE INSURANCE:   YES   NO	

SKIS - CM - #	BOOTS - SIZE - #	MM	CODE	L	VIS	R	P	TI	OUT	IN	DAYS	Q	AMOUNT

<b>C</b>	NAME: _____	HEIGHT: ____ft ____in	WEIGHT: ____lbs	BOOT/SHOE SIZE: ____
	SKIER TYPE:    I    II    III	AGE ____ Male Female	DAMAGE INSURANCE:   YES   NO	

SKIS - CM - #	BOOTS - SIZE - #	MM	CODE	L	VIS	R	P	TI	OUT	IN	DAYS	Q	AMOUNT

LEASE	SPORT PKG.	PERF. PKG	DEMO PKG	DEMO SKI	BOARDS	HELMETS	DAMAGE INS.	DEMO SALES	RETAIL	T-SHIRTS	MISC/DISC.

A	B	C	Customer requests different binding settings INITIALS _____	OUT / IN	\$\$

SUBTOTAL	
TAX	
REPAIR/OTHER	
TOTAL	
PAYMENT	
DATE PD / INITIALS	

		ARRIVAL: _____	1ST SKI DAY: _____	LAST SKI DAY: _____ / _____ / _____
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NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ LOCAL LODGING: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

TIME: \_\_\_\_\_

INITIALS: \_\_\_\_\_

**A**

NAME: _____	HEIGHT: _____ ft _____ in	WEIGHT: _____ lbs	BOOT/SHOE SIZE: _____
SKIER TYPE: I II III	AGE _____ Male Female	DAMAGE INSURANCE: YES NO	

SKIS - CM - #	BOOTS - SIZE - #	MM	CODE	L	VIS	R	P	TI	OUT	IN	DAYS	Q	AMOUNT

**B**

NAME: _____	HEIGHT: _____ ft _____ in	WEIGHT: _____ lbs	BOOT/SHOE SIZE: _____
SKIER TYPE: I II III	AGE _____ Male Female	DAMAGE INSURANCE: YES NO	

SKIS - CM - #	BOOTS - SIZE - #	MM	CODE	L	VIS	R	P	TI	OUT	IN	DAYS	Q	AMOUNT

**C**

NAME: _____	HEIGHT: _____ ft _____ in	WEIGHT: _____ lbs	BOOT/SHOE SIZE: _____
SKIER TYPE: I II III	AGE _____ Male Female	DAMAGE INSURANCE: YES NO	

SKIS - CM - #	BOOTS - SIZE - #	MM	CODE	L	VIS	R	P	TI	OUT	IN	DAYS	Q	AMOUNT

LEASE	SPORT PKG.	PERF. PKG	DEMO PKG	DEMO SKI	BOARDS	HELMETS	DAMAGE INS.	DEMO SALES	RETAIL	T-SHIRTS	MISC/DISC.

A	B	C	Customer requests different binding settings INITIALS _____	OUT / IN	\$\$

SUBTOTAL	
TAX	
REPAIR/OTHER	
TOTAL	
PAYMENT	
DATE PD / INITIALS	