

WINTER PARK RECREATION AREA

Skier/Snowboarder Registration

- **ONE FORM PER FAMILY PLEASE**

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

COUNTY: _____

TELEPHONE NO.: (____) _____

USER'S SIGNATURE: _____ DATE: _____

Number of Skiers _____

Number of Tickets: _____

Number of Snowboarders _____

Number of Rentals: _____

Number of Helmets: _____