HUDSON BAY MOUNTAIN 2019/20 SEASON PASS APPLICATION

Purchaser's Name:	Ног	me Phone #:		
Work/Cell Phone #:		_		
Address (including postal code):				
Email: Family Pricing	with inf	ormation on upcomin	g Events, Deals a	s from Hudson Bay Mountain Resor nd Resort and Real Estate News. Yo "unsubscribe" link at the bottom o ;.
Pass Holder(s) Names (Last name first)	Birth Date Month/Day/Year	Pass Type Adult/Y/C/Sr/Su	pSr	PRICE
1				\$
2				\$
3				
4				
5				
6				
7				
FOR ADMINISTRATIVE US		PASS TOT		
Locker #			er \$	
	<u> </u>	SUBTOTA	<u> </u>	
	PAYMENT/FIN	ANCING PLA	N \$	
			iST \$	
Initial to decline insurance for		Insurand TAL PURCHA		
METHOD OF PAYMENT: (circle o		BIT CASH	CHEQUE	<u> </u>
1. Season Passes are non-refundable and n 2. The Release of Liability Waiver must be C	COMPLETED IN FULL and SIGNED DEF (employee over 19) who will so, a complimentary day pass will usest Services immediately. If the cot to CANCELLATION OR REMO REASON PASS GRANTINGS, OR LEST CONTROLLES OR WARNINGS, OR LEST CONTROLLES OR WARNINGS.	D by all pass holders date and sign as wibe issued ONE TIME pass is not found it VAL by Hudson Bay EVOKED IN THE EVE FAILURE TO OBEY Todren, excluding Gramaximum two adurance of the pass	tness. ONLY. If you f will be replace Mountain Reso NT OF MISCON HE ALPINE RES de 5 and Tot Pa lts, and minimu	forget again, a day pass will d for a reprocessing fee of ort without refund at its sole IDUCT, FRAUDULENT USE OF SPONSIBILITY CODE. asses, all living in the same um one child pass or one youth
DUDGHAGED CICALATURE	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ICNIATURE		
PURCHASER SIGNATURE	WITNESS S	IGNATUKE	DA ⁻	E
Check list for c Application signed?\	office use only. Please cl Waiver completed and s			

Date Season Pass processed and issued? _____