

1830978



MARKER

Date Out:	Time Out:	Date In:	Time In:	Actual Return Date:	Return Time:		
Name: Last _____ First _____ Initial _____						Home Phone: () _____	
Address: Street: _____						Local Accommodations: _____	
City: _____ State: _____ Zip: _____						Local Phone: () _____	
E-mail Address: _____						Skiing Skier Type: (Check) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Your Weight: _____ lbs.		Your Height: _____ ft. _____ in.		Your Age: _____			
Equipment Damage Waiver: <input type="checkbox"/> Accepted <input type="checkbox"/> Declined <small>Accepted/Declined Initial</small>							
This damage waiver applies to equipment breakage only; it does not apply to lost, misplaced or stolen equipment. If the damage waiver is accepted, the shop will absorb the cost of repairing any accidental damage. The customer is responsible for the full retail value of any lost, misplaced, stolen or intentionally damaged equipment.						Payment Method (Circle One) <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Diners Club <input type="checkbox"/> American Express <input type="checkbox"/> Other: _____	
Inventory No./Code		Skiing		Boot Sole Type (check one)			
Ski	Size _____ cm	Skier Code: _____ Final Settings: _____		<input type="checkbox"/> Alpine (ISO 5355) "A" (Adult Sole) <input type="checkbox"/> Alpine (ISO 5355) "C" (Junior Sole) <input type="checkbox"/> GRIPWALK Adult (ISO 9523) <input type="checkbox"/> GRIPWALK Child (ISO 9523) <input type="checkbox"/> Alpine Touring (ISO 9523) <input type="checkbox"/> Other: _____			
Boot	Sole Length _____ mm	Left _____ Right _____ Toe _____ Heel _____		Credit Card: Expiration Date: _____ No.: _____ cvv: _____			
Binding	Model _____	Technician's Signature: _____ Date: _____		Deposit \$ _____ Balance \$ _____			
Pole	Size _____ in.						

AGREEMENT

I accept full financial responsibility for the equipment listed on this form. I promise to return it clean and undamaged by the agreed time and date, and if I fail to do so, I will pay for its repair, cleaning or replacement at the full retail rate, as determined by the shop, as well as for the full rental value of any additional days.

I understand how this equipment works and have received instructions and satisfactory answers to any questions. I agree to check this equipment before each use (including the binding anti-friction device); and if at any time this equipment does not seem to be working properly, I will stop using it immediately and return it for inspection and possible repair or adjustment.

I understand that proper bindings settings depend upon the accuracy of my statements about weight, height, age, and skier type on this form. I have confirmed that the binding release/retention settings on this equipment correspond to those stated on this form.

If this equipment is to be used by someone other than me, I certify that I am acting as agent for the user and that I will provide this form and all pertinent warnings and information to the user.

I HAVE CAREFULLY READ, UNDERSTOOD AND AGREED TO THE TERMS OF THE WARNING, ASSUMPTION OF RISK, LIABILITY RELEASE, INDEMNITY AND HOLD HARMLESS AGREEMENT AND AGREEMENT NOT TO SUE ON THE REVERSE SIDE OF THIS DOCUMENT.

Signature of the Equipment User	Date

Parent/Guardian/Agent: I verify that I am the parent, guardian or agent of the Equipment User and that I have the authority to enter into this agreement on behalf of the Equipment User and I agree to be bound by the terms of the Warning, Assumption of Risk, Liability Release, Indemnity and Hold Harmless Agreement and Agreement Not to Sue on the reverse side of this document.

Signature of Parent/Guardian/Agent (if not an adult user)	Date

CUSTOMER COPY