



# Ski Wolf Ridge

## 2009-2010 Season Pass Application

### Weekly Mon – Thurs unlimited

To purchase your Season Pass please fill out the following information and return it along with the liability waiver and the appropriate amount due. We accept cash upon arrival, checks, money orders and credit cards (Master Card or Visa). For security, call in your credit card information. When we have received your application, signed liability waiver and payment, we will send you confirmation and the date(s) available to have your picture taken for your season pass. **NOTE: College Students must present a valid ID.** If you have any questions please contact: Shellie or Marti in Group Sales at: 1-800-817-4111 ex 1003, 1004 or email at [groupsales@skiwolfridgenc.com](mailto:groupsales@skiwolfridgenc.com)  
See you on the slopes!!!

Please make checks payable to: **Ski the Ridges**

Return to: Wolf Ridge Ski Resort  
Attn: Group Sales  
578 Valley View Circle  
Mars Hill, NC 28754

For Office Use Only

Pass # \_\_\_\_\_  
Date Issued \_\_\_\_\_  
Date Paid \_\_\_\_\_  
Amt Paid \_\_\_\_\_  
RCVD By \_\_\_\_\_  
Waiver \_\_\_\_\_

2009-2010 SEASON PASS RATES		
	Before Dec. 1 <sup>st</sup>	After Dec.1st
	\$300.00	\$400.00
<b>Qualified Rate</b> Please Check One	<input type="checkbox"/>	<input type="checkbox"/>

NAME (Please Print) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

METHOD OF PAYMENT: circle one: CASH      MONEY ORDER  
CHECK#      CREDIT

CREDIT CARD# \_\_\_\_\_ EXP \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENTS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(if under 18 years of age)