## **SNOW SPORT RENTAL AGREEMENT**

You MUST READ and SIGN the AGREEMENT.

Fill out shaded areas below. PLEASE PRESS FIRMLY Don't forget to bring this form with you!

Cell Phone Email			
Street Address City Zipcode			
Name Do you receive emails from us? Y N	Do you receive emails from us? Y N		



Sales / Rent / Repair 929 Sir Francis Drake Blvd Kentfield, CA 94904 / 415-456-2323

Start Date Return Date		seilerskishop@gmail.com / uliseilerskishop.com			
NAME	AGE WEIGHT HEIGHT BSL	SKIS		AMOUNT	Г
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Skier Type (circle one)	INDICATOR T T T T T T T T T T T T T T T T T T	BOOTS			
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Skier Type (circle one)	INDICATOR T T	BOOTS			
(CICIE OTIE)	SETTINGS   H   H				
I accept for use as is, the equipment listed on in my possession.	RELEASE OF LIABILITY. PLEASE READ CAREFU this form and accept full responsibility for the care and	d of the equipment while it is			
I will be responsible for the replacement of full to the shop.	retail value of any equipment rented under this agree	ment from, but not returned			
I agree to reimburse and hold harmless the ski which results from the use of the equipment.	shop for any loss or damage of any kind, other than	reasonable wear and tear,	ADDITIONAL ITEM	s	_
I agree to return all rental euipment by the agreed date in clean condition to avoid any additional charges.					
I understand that there are inherent and other risks involved in the sport for which this equipment is to be used (snow skiing, snowboarding), that injuries are a common ordinary occurrence of the sport and I freely assume those risks.					
I understand that the ski-boot-binding system every situation in which it will release and is the					
I hereby release the ski shop and its owners, a to any person or property resulting from the se responsibility for any and all such damage or in	gents and employees from any and all liability for dar lection, adjustment and use of the equipment, accep njury which may result.	mage and injury to myself or oting myself the full			
I have made no misrepresentations to the ski s	shop in regard to my height, weight, age or skiing abi	lity.			
I verify that the visual indicators on my binding correspond to the settings as shown on this rental agreement form.					
All instructions on the use of my rental equipme	ent have been made clear to me and I understand th	ne functions of my equipment.			
I, THE UNDERSIGNED, HAVE I					
1		DATE			
SIGNER'S SIGNATURE (if skier/snowboarde	r is a minor, signature of guardian is required)	DATE			
SIGNER'S SIGNATURE (if skier/snowboarde	er is a minor, signature of guardian is required)				_
3	er is a minor, signature of guardian is required)	DATE			
4	er is a minor, signature of guardian is required)	DATE	ALL FUNCTIONAL & INSTRUCTIONAL PROCEDURES HAVE BEEN COMPLETED	SUBTOTAL	
, and the second se	CREDIT CARD INFO to my credit card if equipment is not returned on the	e Return Date.	Technician's Signature		
I understand no refunds will be given for early	INITITIAL	II VI III IVAL			_
Name on Credit Card				TOTAL	
Credit Card #			ALL EQUIPMENT RETURNED	DUE	
Expiration Date CW C	ode Billing Zipcode		Staff: Initial & Date Upon Return 2023/2024 ULI SEI	LER SKI SHOP	