



46 Great Hollow Rd., Cornwall, CT 06753
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SKIING and Covid-19

Skiing is an active, outdoor sport. Please understand that despite all the precautions and safety measures we have taken, it is not possible for us to guarantee you or your child a Covid-19 – free environment inside of our facilities, or outside on the mountain. Covid-19 is now a risk inherent in everyday life. If you leave your house, you assume the risk of exposure. **By participating in, and/or allowing your child to participate in, skiing and skiing-related activities, you hereby accept the risk that you and/or your child may be exposed to, and possibly contract, COVID-19.** In light of this, please affirm by initialing below as follows:

I understand and accept that **social distancing and disinfecting are not possible** at all times. I may touch equipment that has been touched by others (including Mohawk Mountain Ski Area staff), and I may come into close contact with other guests and Mohawk Mountain Ski Area staff, including Ski Patrol. _____(initial).

I understand and accept that the **use of face coverings may not always be practical** while at Mohawk Mountain Ski Area. _____(initial).

I understand and accept that **Mohawk Mountain Ski Area, Inc. relies on the truth and honesty of all guests** who visit Mohawk Mountain Ski Area that they are not doing so while they, or any member of their household, are sick or feeling potential Covid-19 symptoms. Neither I, nor anyone in my household, currently has or feels symptoms of Covid-19. To the extent that this changes, I will remove myself (and my family) from Mohawk Mountain Ski Area immediately. _____(initial).

I hereby certify that I have read the above information, understand it, and voluntarily agree to participate and/or to allow my child to participate notwithstanding same.

Guest Name (Printed)

Guest Signature (If Guest is an *Adult*):

Parent/Guardian Name (If Guest is a *Minor*, or Parent/Guardian signing for family)

Parent/Guardian Signature (If Guest is a *Minor*, or Parent/Guardian signing for family)

Date: ____ / ____ / ____