



FLORIDA SKI ADVENTURES

Trip Application Form for Jackson Hole, Wyoming, 2016 January 23 – 30, 2016

The Jackson Hole Snake River Lodge & Spa Florida Ski Adventures package is as follows:

We will be staying at the 4 Star ski-in Snake River Lodge and Spa. 7 nights of luxury accommodations with FSA, Mountain and hotel amenities that are listed in our cover letter. If you have any questions concerning this trip please call me (C. K. Mills) at 813-920-4010. We expect to sell out fast!

This trip Application is for Snake Lodge and Spa, Delta Airlines and our ground transportation- **Saturday, January 23, 2016 to Saturday, January 30, 2016**. Thanks to airline rule changes our deposit will be \$300.00 per person, first come first reserved. Make your checks payable to **Florida Ski Adventures**. **The remaining balance is due to be in our hands by November 1, 2015**. Mail your completed application and deposit to C. K. Mills, 15207 Lake Maurine Dr., Odessa FL 33556. This application covers several trip selections. All prices are for per person, double occupancy (pp/do). **Please mark the room/trip selection that you would like.**

Air transportation from Tampa on Delta Airlines will be as follows:

Flight #	Date	Departure	Arrival
2137	1-23-2016	TPA 7:30am	ATL 9:00am
1076	1-23-2016	ATL 9:44am	JAC 11:58am
1076	1-30-2016	JAC 12:49pm	ATL 6:19pm
1758	1-30-2016	ATL 7:30pm	TPA 9:00pm

- \$1,495.00 – King Room with air.**
Includes King Room, 300 sq. feet, with ground and air transportation
- \$855.00 – King Room, Ground package only - booking own airline travel.**
Includes King Room, 300 sq. feet, booking own air transportation
- \$1,495.00 – Queen Room with air.**
Includes Queen Room, 325 sq. feet, 2 queen beds with ground and air transportation
- \$855.00 – Queen Room, Ground package only - booking own airline travel.**
Includes Queen Room, 325 sq. feet, 2 queen bed, booking own air transportation
- \$1,575.00 – Deluxe King w/ shared balconies with air.**
Includes Deluxe King Room, 350 sq. feet, with ground and air transportation
- \$935.00 – Deluxe King w/ shared balconies, Ground package only - booking own air.**
Includes Deluxe King Room, 350 sq. feet, booking own air transportation
- \$1,695.00 – Premium King w/ sleeper sofa and fireplace with air.**
Includes Premium King Room, 400 sq. feet, with ground and air transportation
- \$1,055.00 – Premium King w/ sleeper sofa and fireplace, Ground only - booking own air.**
Includes Premium King Room, 400 sq. feet, booking own air transportation

For ground transportation packages: In order to utilize the group ground transportation your flights must coincide with the Tampa flights. For example you must arrive JAC at 11:58am or earlier and depart JAC at 12:49 or later. **Important: If you are booking your own air travel, you must send your flight itinerary to Florida Ski Adventures.** Because of weather and airline changes we need to know where you are so if there is a major emergency we can help.

PLEASE PRINT LEGIBLY, AND KEEP A COPY FOR YOUR RECORDS

PRINT EXACT Photo Identification Name <small>(required by airline and TSA, changes from this information could cost you \$150 or more, if not correct and clear)</small>	First Name or Nickname for Name Badge	Renting Equipment? Yes/No	Skier Ability: <u>Beginner,</u> <u>Intermediate,</u> <u>Advanced, or</u> <u>Expert</u>	T-Shirt Size (M, L, XL)	Delta Airlines Frequent Flyer Number	Date of Birth for Airline Security
Skier A						
Skier B						
Skier C						

Below information will not be shared by FSA (Please Print Legibly)

Email Address: _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Bus: (____) _____ - _____ }
 Home: (____) _____ - _____ } Circle the Best
 Cell A: (____) _____ - _____ } Phone Number
 to Reach You

In Case of Emergency - Notify (someone not on this trip):

Name: _____
 Day/Night Phone: (____) _____ - _____
 Cell Phone: (____) _____ - _____

<u>FSA Use Only</u>	
<u>Deposit and Signed Application:</u>	
Date Recd:	____ / ____ /15 Ck# _____
Amount: \$	_____ .00
Total Trip Amt Due: \$ _____ .00	
Balance Due:	
Date Recd:	____ / ____ /15 Ck# _____
Amount: \$	_____ .00
Net Bal:	_____ Ck# _____ Date _____

RELEASE OF LIABILITY

I and my family do hereby appoint FLORIDA SKI ADVENTURES ("FSA"), its officers, staff, and agents, as our agent to perform all acts and to enter into any and all contracts as may be deemed desirable in connection with this FSA ski trip. I understand that FSA acts only as coordinator and accepts no responsibility for the services of any person, ski area, airline, motor coach, hotel, restaurant, or travel agent or any organization whatsoever rendering any of the services or accommodations being offered on this trip. This ski trip is based upon current tariffs and is subject to change without notice. Prices on this trip for primary air and lodging have already been contracted. While FSA does not wish to charge any additional fees, any new taxes, airport fees or other unforeseen increases will be shared among all participants. FSA will notify participants as soon as practical of these additional charges. FSA will provide documented proof of additional charges! FSA accepts no responsibility in whole or in part for any delays, weather conditions, delayed departure or arrival, missed planes or other carrier connections, loss, damage or injury at the mountain or in route to any person or property, mechanical defect or failure of any nature whatsoever caused, or for any substitution of hotels or of common carrier, with or without notice, or for any additional expenses occasioned thereby. We fully understand that FSA is a voluntary association run by volunteers. By participating, we do not rely on the expertise of any officer, staff, or coordinator or the agents of any of the foregoing. We agree that we are solely responsible for our personal safety, conduct, damages, and any personal charges charged to the FSA master account and for meeting all payment deadlines. Should we miss departure, we understand that we may not be able to recover any part of our trip or activity payment. We agree to indemnify and hold harmless FSA, its officers, staff, and agents or contractors from any loss, cost or expense incurred by or attributable in any way to FSA in connection with this ski trip. **You must be at curbside and pick up your information envelope 2 hours before departure.** Airline E-tickets in Tampa, Florida will be issued at curbside baggage check-in by the Delta check-in personnel. We agree to abide by the rulings of the Trip Leaders in connection with this ski trip. **Persons arriving less than one hour prior to departure should go directly to the airline counter.**

CANCELLATION AND PRIORITY POLICIES

1. Cancellation by a participant received before November 1, 2015 shall result in cancellation fee of the total cost to FSA.
2. Cancellation received on or after November 1, 2015 shall result in forfeiture of whichever is greater, the deposit, or the total cost to FSA of such cancellation. The participant may obtain an agreeable substitute, but shall be liable for any transfer fees.
3. All cancellations by participants must be in writing or Email to the trip leader.
4. All non-refundable airline tickets or other vouchers will be returned to canceling participant.
5. All trip fees are due on the date specified by FSA. If not received when specified, the participant risks losing their place on the trip and being treated as having canceled. Call either of the FSA trip coordinators, C. K. Mills 813-920-4010/813-323-1601 or Mohit Sambhu 813-384-8388.
6. The **final** date of receipt by FSA of **both a properly completed trip application, signed by all parties, and receipt of the full deposit amount** will determine flight and accommodation priority. A trip application without a check is not complete, as is a check without a trip application. All trip applications must have original signatures and be received through the US mail or an original scan sent through email as an attachment.

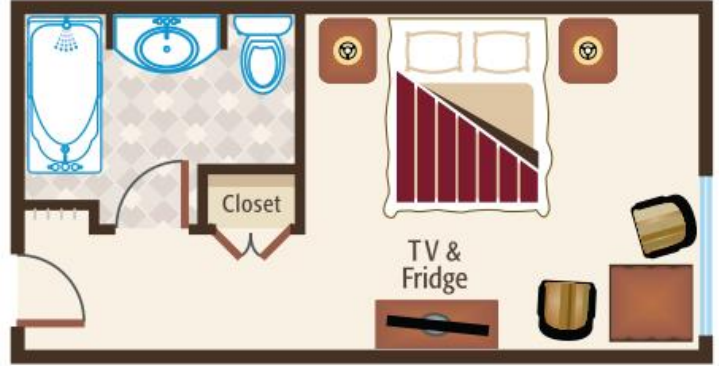
I (We) have read, understand, and agree to the above Release of Liability and the Cancellation Policy and will pay the balances due on this application by the dates indicated above. All adults on this trip application must sign below.

_____ Signature of Applicant	_____ Date	_____ Signature of Parent of Minor(s)	_____ Date
_____ Signature of Applicant	_____ Date	_____ Signature of Applicant	_____ Date

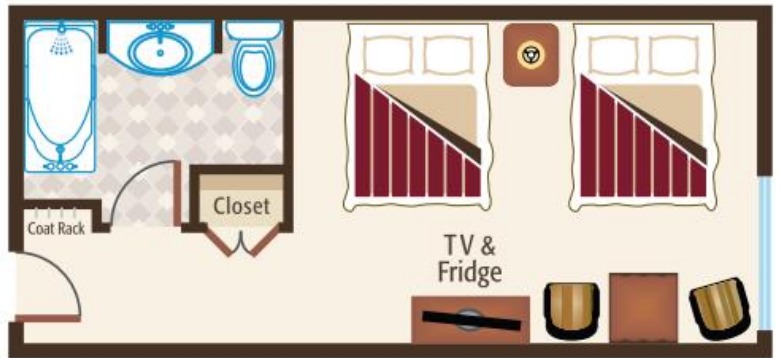
Hotel Room Floor Plans



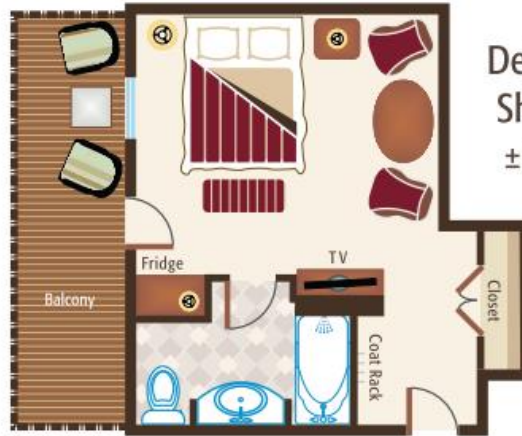
Efficiency King ± 300 Square Feet



Deluxe Two Queen Beds ± 325 Square Feet



Deluxe King with Shared Balcony ± 350 Square Feet



Premium King with Sleeper Sofa and Fireplace ± 400 Square Feet



Additional floor plans are available at <http://www.snakeriverlodge.com/accommodations>