



Employment Application

Date: _____

Mail to: Nordic Mountain
 PO Box 983
 Wautoma, WI 54982

Name: _____
First Middle Initial Last

Address: _____ City: _____ State: ____ Zip: _____

Home Phone: _____ Cell Phone: _____ Date of Birth: _____

e-mail: _____ Are you a U.S. Citizen? Y N Sex: M F

Please rank positions applying for 1 thru 3:

- | | |
|---|---|
| <input type="checkbox"/> Lift Operator (Must be 18) | <input type="checkbox"/> Bar – Wait staff, bartender, cook (Must be 18) |
| <input type="checkbox"/> Ski Rental (Must be 18) | <input type="checkbox"/> Boot Rental / SOS |
| <input type="checkbox"/> Snowboard Rental | <input type="checkbox"/> Cafeteria |
| <input type="checkbox"/> Ski Instructor | <input type="checkbox"/> Snowboard Instructor |
| <input type="checkbox"/> Ticketing | <input type="checkbox"/> Tubing |
| <input type="checkbox"/> Snowmaking (Must be 18) | <input type="checkbox"/> General Maintenance |

PAST EMPLOYMENT:

COMPANY	PHONE	Position	PERIOD FROM TO	RATE OF PAY FROM TO	REASON FOR LEAVING

PERSONAL REFERENCES:

NAME	RELATIONSHIP	PHONE	BEST TIME TO CALL

EDUCATION:

SCHOOL	CITY	COURSE OF STUDY	# OF YEARS COMPLETED	DATE GRADUATED	CUMMULATIVE GPA
High School					
College					
Other					

1. Please briefly explain why you want to work at Nordic Mountain?

2. Do you have any special skills or qualifications for the position(s) you are applying for?

3. Have you been convicted of a crime within the past ten years, excluding traffic violations? _____
If yes, list convictions:

The information provided by me in this employment application is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal. You are hereby authorized to conduct any investigation of my personal history and/or credit and financial records employing investigative or credit agencies or bureaus of your choice subject to the provisions of the Fair Credit Reporting Act. I understand that, within a reasonable period, I may make a written request for detailed information concerning such investigation.

Signature of Applicant: _____ **Date:** _____

PLEASE NOTE: If you are applying for a managerial position, we ask that you include a resume and a cover letter detailing the position you are applying for.

Employee Information, Availability, and Release

Full Name: _____ Date: _____

Address: _____

e-mail: _____

Date of Birth: _____ Social Security # _____

Home Phone: _____ Cell Phone: _____

Other Phone: _____ Best phone to call: Home Cell Other

POSITION(S) APPLIED FOR: _____

AVAILABILITY:

In the spaces below, write **YES** if you are available to work and **NO** if you are unavailable to work.

	THU 12/24	FRI 12/25	SAT 12/26	SUN 12/27	MON 12/28	TUES 12/29	WED 12/30	THU 12/31	FRI 1/1/9	SAT 1/2/9	SUN 1/3/9
DAY		CLOSED									
NIGHT	CLOSED	CLOSED									

Weeknights:

Monday 4:00 – Close _____

Tuesday 4:00 – Close _____

Wednesday 4:00 – Close _____

Thursday 4:00 – Close _____

Weekends:

Friday 9:00 – 5:00 _____

Friday 4:30 – Close _____

Saturday 9:00 – 5:00 _____

Saturday 4:30 – Close _____

Sunday 9:00 – 5:00 _____

Sunday 3:00 – Close _____

Students on College Break
List availability in space below:

Other notes on your availability:

Please fill out the back of this page completely.

EMPLOYMENT LIABILITY WAIVER

Please read carefully and initial after each statement. If the person is under the age of 18 both the parent and child must initial each statement.

In consideration of being permitted to ski at Nordic Mountain, LLC	Adult	Child
1. I understand and accept the fact that alpine skiing in its various forms is a hazardous sport that has many dangers and risks.	_____	_____
2. I realize that injuries are a common and ordinary occurrence of this sport.	_____	_____
3. I agree, as a condition of being allowed to use the ski area facility and premises that I freely accept and voluntarily assume all risks inherent in the sport including personal injury, death or property damage.	_____	_____
4. I further hereby RELEASE AND FOREVER DISCHARGE Nordic Mountain, LLC and its agents, employees, directors, and officers from any and all liability for personal injury or property damage which results in any way from its or their NEGLIGENCE ACTS OR OMISSIONS with respect to the design, construction, maintenance or repair of the conditions on or about the premises and facilities.	_____	_____
5. I further hereby RELEASE AND FOREVER DISCHARGE Nordic Mountain, LLC and its agents, employees, directors, and officers from any and all liability for personal injury or property damage which results in any way from its or their NEGLIGENCE ACTS OR OMISSIONS with respect to the operations of the ski area including, but not limited to, grooming, snow making, or ski lift operations.	_____	_____
6. I further hereby RELEASE AND FOREVER DISCHARGE Nordic Mountain, LLC and its agents, employees, directors, and officers from any and all liability for personal injury or property damage which results in any way from its or their NEGLIGENCE ACTS OR OMISSIONS of any employees or agents of the area.	_____	_____
7. I accept full responsibility for any and all damage or injury to myself of any nature or kind which may result from my participation in skiing or any other activities at the area.	_____	_____

CAUTION: READ BEFORE SIGNING! THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND WILL BAR YOUR RIGHT TO SUE.

Signature: _____ Date: _____ Parent Signature: _____ Date: _____

PARENTAL INDEMNIFICATION CLAUSE

If I am signing this Liability Release on behalf of a minor (less than 18 years of age) (the "Child"): I represent that I am the parent and/or legal guardian of such Child. I accept responsibility for all the Child's medical expenses. I agree to INDEMNIFY the Released Parties for any and all claims whatsoever brought by the child; and I agree to INDEMNIFY the Released Parties for any and all claims whatsoever brought by a third party arising in connection with the Child.

Signature (Parent/Guardian): _____ Date: _____

SKIER RESPONSIBILITY CODE

With the use of the Lift Ticket or Season Pass the skier agrees to abide by the skier responsibility code as follows:

1. Always stay in control, and be able to stop or avoid other people or objects.
2. People ahead of you have the right of way. It is your responsibility to avoid them.
3. You must not stop where you obstruct a trail, or are not visible from above.
4. Whenever starting downhill or merging into a trail, look uphill and yield to others.
5. Always use devices to help prevent runaway equipment.
6. Observe all posted signs and warnings. Keep off closed trails and out of closed areas.
7. Prior to using any lift, you must have the knowledge and ability to load, ride, and unload safely.

I have read and understand the terms of the RELEASE OF LIABILITY and the Skier Responsibility Code. I am signing it freely and of my own accord, realizing it is binding upon myself, my heirs and assigns, and in the event that I am signing it on behalf of any minors, that I have full authority to do so. Realizing its binding effect on them as well as myself. As a condition of being permitted to use any and all of the facilities of the ski area, I further agree to assume all risk of personal injury or loss or damage to any of my property.

Signature: _____ Date: _____ Parent Signature: _____ Date: _____