

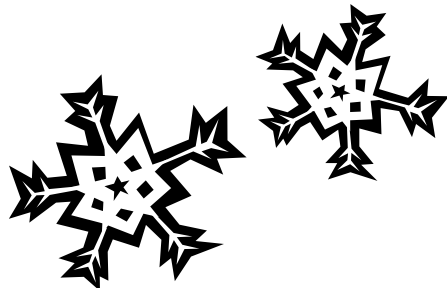
## Membership Rates

Once again this year, Wentworth will be offering *Early Bird Rates* for the 2021-2022 season. Don't miss out on your opportunity to secure your pass and the option to spread the cost over as many as 4 months. **Bonus!** Check out the options on the enclosed application form.

## Ski Insure - Season Pass Cancellation Insurance

**No deferral/refund will be issued without purchase of Ski Insure.**

Wentworth offers protection for your investment in a season pass. For just \$25/person or \$100/family season pass including taxes you can insure your pass will be deferred/refunded if you are unable to ski by reason of injury, illness or unexpected job relocation. Coverage begins when you purchase your pass.



## Ski Insure

### Season Pass Cancellation Insurance

Wentworth will defer/refund your pass fee in the event:

1. An injury, illness or other certified medical condition prevents the insured skier from participating in the sport.
2. The insured skier is relocated outside a reasonable radius of Wentworth as a result of a job transfer.

#### Amount of deferral/refund:

Should the insured become incapable of skiing at Wentworth before the season begins, the full pass will be deferred/refunded. Once the pass has been issued and season begins, deferrals/refunds will be based on 100 ski days. (Ex. If Wentworth has had 20 Ski Days when you are transferred and unable to ski, your deferral/refund equals 80% of your pass.)

#### Conditions:

**\*\*\*Insurance must be purchased at the same time as your pass.\*\*\***

- The period of non-participation must be at least 30 days.
- Claim must be made within 30 days and the pass must be surrendered immediately.
- Insurance does not cover incapacitation caused or contributed by intentional self injury.

#### How to make a Claim

1. Present your claim at the ski area within 30 days.
2. You are required to present:
  - a. season pass
  - b. a report/notification from your doctor, complete with date on which the medical condition precluded skiing and prognosis.Or in the event of job relocation, a letter from your employer will be required.



# 2021-2022

## Season Pass Application

Wentworth, Nova Scotia



### CONTACT US:

Ski Hill      Ph: 902-548-2089  
Off Season      Ph: 902-896-1205  
Mail:      Ski Wentworth  
            PO Box 1202  
            Truro, NS B2N 5H1  
Email:      skiadmin@skiwentworth.ca

[www.skiwentworth.ca](http://www.skiwentworth.ca)

# Rates

## SUPER EARLY BIRD

Until June 30, 2021

Payment plans available

	Rate	Total
Adult (18-64)	\$324.99 + hst	\$373.74
Senior (65+)	\$324.99 + hst	\$373.74
Student (12-17)	\$324.99 + hst	\$373.74
Child (6-11)	\$269.99 + hst	\$310.49
Family **	\$1120.99 + hst	\$1289.14
Infant (5 & under)	\$52.17 + hst	\$60.00

## EARLY BIRD

Until Oct. 31, 2021

Lump sum payment only

	Rate	Total
Adult (18-64)	\$364.99 +hst	\$419.74
Senior (65+)	\$364.99 +hst	\$419.74
Student (12-17)	\$364.99 +hst	\$419.99
Child (6-11)	\$299.99 +hst	\$344.99
Family **	\$1264.99 +hst	\$1454.74
Infant (5 & under)	\$52.17 +hst	\$60.00

## REGULAR

After Oct. 31, 2021

Lump sum payment only

	Rate	Total
Adult (18-64)	\$424.99 +hst	\$488.74
Senior (65+)	\$424.99 +hst	\$488.74
Student (12-17)	\$424.99 +hst	\$488.74
Child (6-11)	\$329.99 +hst	\$379.49
Family **	\$1454.99 +hst	\$1673.24
Infant (5 & under)	\$52.17 +hst	\$60.00

Student is defined as a full-time student with a valid student ID, 12 years and older. \*\* Family is defined as parents and their children (under 18 or a full-time student with valid ID) within a household.

Prices and terms are subject to change without notice.

The applicable age for a season pass is the age at the date of purchase.

You will be required to sign a Liability Waiver when you pick up your season pass.

For payment by cheque, all post dated cheques must be forwarded. No cheques dated beyond Oct. 31, 2021. All NSF cheques will be charged \$75 fee.

All memberships must be paid in full prior to receiving a Season Pass ID card.



**No Deferral/Refund will be issued without Ski Insure**

- I Accept Ski Insure  
 I Decline Ski Insure

Office	Passholder Name	Age	Type of Pass	Price

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Town/City: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

Ski insure(\$21.74/person

**A. Subtotal**

**B. HST (TAX 15%)**

**TOTAL**

### Payment Plan Options

\_\_\_\_\_ **4 Equal Payments**

Available before April 30

\_\_\_\_\_ **3 Equal Payments**

Available May 1 to June 30

1st payment due at time of purchase. Remaining payments processed automatically every 2 months through online Paypal system.

No Interest charged for payment plan.

OR

\_\_\_\_\_ **1 Lump Sum Payment**

Cheque/ VISA / Mastercard / AmEx # \_\_\_\_\_

3 Digit Security # \_\_\_\_\_

Expiry \_\_\_\_\_ Signature \_\_\_\_\_

Print Name: \_\_\_\_\_

**How do you identify yourself?**

- Skier  Snowboarder  
 Competitor  Recreational

*Skier or rider?*