

## HOURS OF OPERATION

9 am - 5 pm 7 days a week  
PLUS: 5 - 8pm Tues/Wed/Thurs evenings for skiing and snowshoeing

## DAILY RATES, LESSON AND MORE!

<b>Skiing and Snowshoeing Trail Fees</b>	
Adult:	
Full Day	\$18
Half Day	\$15
Night	\$9
Teen:	
13-17 years	\$7
Teen pack rate buy 4 passes for	\$24
Child:	
7-12 years	\$5
6 and under	free
Seniors:	
60 plus	\$10

<b>Ski Rentals</b>	
Adult:	
Full Day	\$20
Half Day	\$15
Night	\$8
Skate skis/boots/poles	
Full Day	\$30
Half Day	\$20
Child:	
Junior sizes	\$10

<b>Snowshoe Rentals</b>	
Adult/Child:	
Full Day	\$15
Half Day	\$13
Night	\$7

<b>Ski Lessons</b>	
Scheduled Weeken Group Lessons: Sat/Sun 12pm	
Group Lesson	\$15
w/trail & rentals	\$40
Classic/skate ski private/semi-private lessons by appt.	

<b>Sledding Fees</b>	
All ages \$2	

<b>FamilyDay/Night</b>	
Tuesdays: Buy one adult ski pass and get a child admission <b>FREE!!</b>	

\* All Rentals for on-premis use only  
\* Night Rate Applicable 5-8 T/W/TH  
\* Daily rates include sales tax

\* Purchase a trail ticket and use the sledding hill for **FREE!**

**School and Youth**  
Schduled Weekday non-profit & school group includes trail and rental

All ages \$7

## WINTER MEMBERSHIP RATES

Winter membership (Dec 2009-March 2010) Non-transferable, valid all daylight & open evening hours

<b>Winter</b>	
Use of all Catamount winter facilities	
<b>Early Season Rates</b>	
(before 12/15/09)	
Adult	\$135
Additional adult	\$105
Junior	\$60
Seniors(60+)	\$80
Family	\$300

<b>Season Rates</b>	
(after 12/15/09)	
Adult	\$150
Additional adult	\$120
Junior	\$60
Senior(60+)	\$100
Family	\$350

<b>Winter Punch Card</b> (Dec 2009-Mar 2011)	
Transferable, open hours, winter only	
Skiing 10 visits	\$120

<b>Annual memberships</b>	
(Dec 2009-Oct 2010)	
Nontransferable, valid all daylight & open evening hours each season	
Annual:	
Use of Catamount winter & summer season rates	
Adult	\$230
Additional adult	\$180
Junior	\$120
Seniors(60+)	\$140
Family	\$480

Name(s) \_\_\_\_\_ Birthdate(s) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # (day) \_\_\_\_\_ (night) \_\_\_\_\_ Emergency Name & # \_\_\_\_\_

Car Plate # \_\_\_\_\_ Email: \_\_\_\_\_ Sub Total \$ \_\_\_\_\_

Type of Membership \_\_\_\_\_ 7% Sales Tax \$ \_\_\_\_\_

Please make check payable to Catamount Donation \$ \_\_\_\_\_

or provide credit card information: Name/#!/Exp. date \_\_\_\_\_ Total \$ \_\_\_\_\_

**Mail to: Catamount 592 Gov. Chittenden Williston VT 05495 or Fax 802-879-6066**