

4th & 5th Graders

Ski & Ride FREE

Showdown Montana



2017-2018 Season Pass Application

Students first & last name: _____

E-mail: _____

Phone: _____

Mailing Address: _____ City _____ State _____ Zip _____

Parent or Guardian Name: _____

Parent Signature: _____

Please submit this application along with:

- Proof of your 4th/5th grade status (a recent report card, copy of birth certificate, school ID)
- \$10 Processing fee payable to Showdown Montana

Mail To:

Showdown Montana
PO Box 92
Neihart, MT 59465

Please bring completed form, valid ID, **AND THE STUDENT** to the Great Falls Town Office (See website for days & hours of operation) or to Guest Services upon your first visit to the mountain to receive your pass.

For more information please visit:

Visit showdownmontana.com or contact Showdown Montana by calling [406-236-5522](tel:406-236-5522) or emailing info@showdownmontana.com.