



“GOOD THINGS COME IN THREES”

**SUTTON, My MOUNTAIN RESORT!
REFERRAL FORM**

1. FILL IN ADDRESSES OF THE “NEW MEMBERS” YOU ARE REFERRING.
2. RETURN REFERRAL FORM BY MAIL, OR BY FAX TO (450) 538-0080.

YOUR NAME & ADDRESS			
First name :	Last name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal code :	
Telephone number :	Email address :		

NAME & ADDRESS OF FIRST “NEW MEMBER” REFERRED			
First name :	Last name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal code :	
Telephone :	Email address :		

NAME & ADDRESS OF SECOND “NEW MEMBER” REFERRED			
First name :	Last name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal code :	
Telephone :	Email address :		

I HAVE READ AND ACCEPT THE CONDITIONS :

Date : _____

Signature : _____

CONDITIONS

1. 50% discount applies to Membership cards valid from Monday to Friday only.
2. To be considered a “New Member”, the individuals referred must be 18 or over, not have been a Member at SUTTON, My mountain resort! for the past three years and must purchase a card valid from Monday to Friday only.
3. Request must be approved by Ski Sutton inc.
4. This promotion cannot be combined with any other offer.



THE AMBASSADORS

SUTTON, MY MOUNTAIN RESORT! REFERENCE FORMS

- PLEASE FILL IN THE INFORMATION FOR THE NEW MEMBER THAT YOU ARE REFERRING OR FOR THE PERSON IN CHARGE OF THE FAMILY THAT YOU REFERRING.
- RETURN THE REFERENCE FORM BY MAIL OR BY FAX AT THIS NUMBER (450) 538-0080.

NEWLY REFERRED MEMBER

First name :	Name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal Code :	
Telephone :	e-mail :		
First name :	Name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal Code :	
Telephone :	e-mail :		
First name :	Name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal Code :	
Telephone :	e-mail :		
First name :	Name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal Code :	
Telephone :	e-mail :		
First name :	Name :	Date of birth (day/month/year):	Gender (F/M) :
Address :			
City :	Province :	Postal Code :	
Telephone :	e-mail :		

I HAVE READ AND ACCEPT THE CONDITIONS:

Date : _____

Signature : _____

CONDITIONS:

- The \$50 rebate only applies on an individual Membership card at regular price, valid 7 days a week (Maximum of 100\$ per household)
- To be considered "New Member" the referred person must be 18 years old and over, not be part of your immediate family, not have been a SUTTON, My mountain resort! Member for the past three years and subscribe to a regular 7 day membership card.
- Request must be approved by Ski Sutton inc.
- This promotion cannot be combined with any other offer.

Ski Sutton inc. • P.O. Box 1580 • Sutton • Quebec • J0E 2K0 • Tel. : (450) 538-2339 • Fax : (450) 538-0080
e-mail : sutton@montsutton.com • Subscribe on our web site at www.montsutton.com to keep in touch with our upcoming activities and to receive our daily snow condition reports free.