2017 Winter Ski Retreat



Who: St. Matthew and Immanuel Youth in grades 6-12

Friends are welcome, but limited to 2 friends per member

When: Friday, January 27th through Sunday, January 29th

Where: Lodging at Wilderness Resort & Water Park - Wisconsin Dells

Skiing & Snowboarding at Cascade Mountain - Wisconsin

Cost: \$225 per person - if you do NOT need to rent skis/snowboard

\$250 per person - if you need to rent skis/snowboard

(Students may use Youth Shares to pay for this trip.)

Includes: transportation, 2 nights' lodging, breakfasts and dinners, skiing/snowboarding lift

ticket, unlimited waterpark access, fun activities!

What to Bring?

Bible, pillow, blanket/sleeping bag, swim suit, sunglasses, toiletries (shampoo, soap

deodorant, toothbrush/toothpaste), cash for lunch at Cascasde on Saturday and fast food lunch on Sunday, warm clothes (hat, gloves, scarf, thick socks), skis or snowboard and

helmet (if not renting)

SIGN UP DEADLINE IS SUNDAY. JANUARY 8. 2017

All forms and payment are due by January 8th.

Required Forms Checklist:

- ___ Winter Retreat Registration Form
- ___ Youth Ministry Release Form
- ___ Cascade Mountain Release of Liability Form

(must be signed by all participants, even if not renting equipment)

WINTER RETREAT REGISTRATION FORM

St. Matthew Lutheran Church, Barrington, Illinois January 27-29, 2017

Name:	
if non-member, friend of	
Check <u>one</u> of the following:	
I will ski/snowboard and need to rent equipment	\$250
I will ski/snowboard and <u>do not</u> need to rent equipm	ent \$225
I am using this amount of Youth Shares to pay for this trip: (Contact Neva to see how much you have in your account!)	
Total Money Enclos	ed:
Parent/Guardian Permission: I grant permission for my child	to attend the 2017 Winter Retreat
(January 27-29) sponsored by St. Matthew Lutheran Church.	to attend the 2017 William Retreat
Parent/Guardian Signature:	Date:
I/we <u>DO GRANT</u> permission for my child's photograph to be take of St. Matthew Lutheran Church, and in church-sponsored social medi	
I/we <u>DO NOT GRANT</u> permission for my child's photograph to be publicity of St. Matthew Lutheran Church, and in church-sponsored sc	
Youth Conduct Agreement:	
agree to fully participate in all group activities and conduct myself as times. I also agree to follow the guidelines set forth by the adult leade to do so could lead to my being sent home early at my expense.	·
Youth Signature:	Date:

This form and full payment of either \$225 (for no equipment rental) or \$250 (equipment rental included) must be submitted to the Church Office no later than January 8th, 2017.

2017 Youth Ministry Release Form

St. Matthew Lutheran Church Barrington, Illinois

Present through December 31, 2017

This release form will cover all ministry activities, events, and outings of St. Matthew Lutheran Church, Barrington, Illinois during 2017. In order for your son/daughter to participate in St. Matthew's youth ministry programs, please complete and return this form to Neva Hillard (mailbox across from church office). This form will be renewed annually.

cannot be contacted, we (I) authorize the youth lead been entrusted, to secure the necessary medical or of doctor's office. We (I) also give permission for our	has permission to participate in the Church, Barrington, Illinois. In the event that the parent or guardiar ders of St. Matthew Lutheran Church, in whose care the minor has dental diagnosis or treatment at any licensed hospital, clinic, or ar (my) child to ride in the vehicle designated by the youth leaders, attending and participating in youth ministry programs sponsored by	
St. Matthew Lutheran Church.		
(Father's signature)	(Mother's signature)	
(rather's signature)	(Mother's signature)	
(Guardian's signature)	(Date completed)	
Name of Youth:	Birth Date:	
Address:		
Home Phone:	Emergency Phone:	
Health Insurance Company:		
Policy and/or Group Number:		
Physician's Name and Phone:		
Dentist's Name and Phone:		

Please list any allergies, special medical problems, or medications your child may have on the reverse side of this page.

Cascade Mountain Release of Liability - Parental Permission Agreement

This form is required for all minors unaccompanied by a parent or legal guardian who is renting equipment.

This form is required for	an minors unaccompanied by a parent or legal gr	uuruun wno is rennng equipmem.
NAME	PHONE ()	
GROUP NAME	TRIP DATES	
CASCADE MOUNTAIN, HEREBY RELEATION CASCADE MOUNTAIN LAND HOLDINGS PERSONAL INJURYTO MY CHILD OR DATE OF FAILURES TO ACT OF CAMOUNTAIN LAND HOLDINGS LLC, TINSPECTION, MAINTENANCE AND/OR RICHILD CONCERNING THE EQUIPMENT EQUIPMENT. I accept for myself and on behalf of my child full requipment by my child, and it is my intention to and their owners, agents and employees for any against or sue Cascade Mountain Management skiing/snowboarding and/or the use of this equipm I understand that for a fee of \$60.00 in addition to the liability. In signing this Release of Liability, I acknowled the signing this document, I am WAIVING certain Management Corporation or Cascade Mountain Management Corporation or Cascade Mountain Management Corporation or Cascade Mountain	SE AND FULLY DIS-CHARGE CASCADI LLC, THEIR OWNERS, AGENTS AND EMB MAGE TO MY CHILD'S PROPERTY WHICH GCADE MOUNTAIN, CASCADE MOUNTA HEIR OWNERS, AGENTS, OR EMPLOY NTAL OF THE EQUIPMENTAND/OR IN TH AND ITS USE AND/OR IN ANY WAY AR ESPONSIBILITY FOR THE AND SECOND OF THE	ENOUBOARDING EQUIPMENT TO MY CHILD BY E MOUNTAIN MANAGEMENT CORPORATION PLOYEES FROM ANY AND ALL LIABILITY FOR H IS CAUSED IN ANY WAY BY THE NEGLIGENT IN MANAGEMENT CORPORATION, CASCADINES IN THE INSTALLATION, ADJUSTMENT E INSTRUCTIONS GIVEN OR NOT GIVEN TO MY RISING FROM THE USE OR RENTAL OF THIS may kind which may result from the use of the ski/snowboard ment Corporation, Cascade Mountain Land Holdings LLC edescribed equipment. I further agree not to make a clair regs LLC for injuries or damage relating to my child its contents. This document constitutes the final and Holdings LLC and the undersigned. I am aware that be my child, including the right to sue Cascade Mountain and Holdings LLC, and I sign of my own free will cantain Land Holdings LLC, and I sign of my own free will
B. PARENTAL PERMISSION AGREEMENT: I UNDERSTAND that my child will be renting equipolation skiing/snowboarding equipment. I UNDERSTAND and am aware that skiing/snowb death and that personal injuries and damage to propand all risks of injury or death to my child or dama I UNDERSTAND that the ski equipment being funcircumstances and that it is not possible to predict of freedom from injury while skiing. I further understand lower portion of my child's leg or any other parts of my child's knee and that the boot-binding system will real tunderstand to force the snowboard boot-binding as a result of forces during ordinary operation, and I UNDERSTAND that I am responsible for any data.	parding involves certain inherent risks, dangers and erty are a common and ordinary occurrence in the stee to his/her property while using the equipment whished forms part of a ski-boot-binding system which very situation in which it will or will not release and and agree that the ski-boot-binding system may receively child's body. I further understand that the boot-binding trelease in the event of a backward fall. System WILL NOT ORDINARILY RELEASE durit is therefore absolutely NO GUARANTEE OF Manage to the equipment while in my child's possession	hazards which can result in serious personal injury or sport. I hereby agree to freely and expressly assume any nile skiing/snowboarding. The will NOT RELEASE at all times or under all de that its use cannot guarantee my child's safety or duce, but does NOT ELIMINATE, the risk of injury to the mg system will not reduce at all the risk of injury to my tring use, nor is it specifically designed or intended to release Y CHILD'S SAFETY. Ton. This includes, but is not limited to theft or loss.
be returned at the end of each session to avoid addi	ional charges.	ement is for dates listed above only and the equipment is tription of the equipment my child rents, and that my child
	GNING!! THIS DOCUMENT AFFECTS YOUR WILL BAR YOUR AND YOUR CHILD'S RIG	
Parent's Signature	Date	
Parent's Signature	Date	
User's Signature	Date Age	

State ____ Zip ___

City___

Street_

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