

LINCOLN-SUDBURY REGIONAL HIGH SCHOOL  
Fact Sheet - After School-Hour Trips KEEP THIS SHEET

1. Activity: LS Ski/Snowboard Club
2. Dates: Wachusett trips Dec. 14, Jan 4, 18, Feb. 8, 29 and March 28, pending conditions, (usually "blue" Fridays) Sign up and pay for trips in 402A or to any club advisor. Sunday River weekend is weekend of March 8 or 15, confirm with Ms. Pilch, Outdoor Club Advisor
3. Location: Mt. Wachusett Ski Area, Princeton Mass: [www.Wachusett.com](http://www.Wachusett.com)
4. Description of the activity and equipment needed. Evening snow boarding or skiing, usually 4 - 10 PM. Leave school about 3, return ASAP after closing, usually about 11:15. Students will call home with approximate return time if different than 11:30 PM. Students may bring their equipment to the science common room (A401) before school on the day of the trip, and are responsible for coming with adequate clothing for the weather. Equipment may be rented at the mountain. All abilities welcome, but beginners need to make sure there is someone else at their level coming that evening as students may not ski alone. The group will meet in the lodge once during the evening for check in and snack, and again at closing time.
5. School Supervisors/Club Advisors: Alison Sanders-Fleming, Mark Sobkowicz, Leslie Knight science dept. At least one of us will be on each trip
6. Phone Contacts: Parent representative needed. ASF cell 617 653 6472. MS 978-783-1822 LK 774 270 2775
7. Number of Students Participating: Minimum: 6 per week Maximum: 9 in van
8. Transportation Arrangements: With teacher in school van (usually). If school van "bumped" for sports trips, we'll seek parents in private cars. Students must travel with the group for us to be responsible for them
9. Insurance Required: Student must be adequately covered under family policy. Please be aware that snow boarding and skiing are risky activities and that the school cannot be liable for injuries. Students must board and ski responsibly and with a friend(s).
10. Food & Equipment: Bring a snack, or money to buy. Come prepared for the weather.
11. Financial Arrangements: \$15 van/chaperone fee must be in before trip to confirm your place. Bring to the mountain \$ for lift-ticket, (\$39 all lifts, rentals about \$32) For possible financial aid, please contact Alison S-F two weeks before a trip. Season passes bought on the through the club on-line cost \$199 by 10/17 for weekdays, evenings, \$10 off on weekends & holidays, transferable to other mountains. Group is Lincoln-Sudbury. Advisor is Alison Sanders-Fleming

Please sign and return permission and medications forms which follow (Neither Wachusett nor teachers may give any medications.) to any advisor's mailbox. Forms are on the club website: [www.lsrhs.net](http://www.lsrhs.net), LS Resources, Activities

TO: LINCOLN-SUDBURY REGIONAL HIGH SCHOOL

THIS IS TO NOTIFY YOU THAT I HAVE READ THE FACT SHEET FOR THE

06-7 TRIPS TO: Mt. Wachusett Ski Area, with LS Ski/Snowboard Club AND GIVE MY PERMISSION FOR (NAME) \_\_\_\_\_ TO PARTICIPATE.

I UNDERSTAND THAT THIS WILL REQUIRE HIM/HER TO ACT RESPONSIBLY AND MATURELY; AND AGREE THAT IF HIS/HER BEHAVIOR IS JUDGED INAPPROPRIATE OR UNACCEPTABLE BY THE SCHOOL REPRESENTATIVES WHO ARE SUPERVISING THE ACTIVITY, PARENTS WILL BE CONTACTED IMMEDIATELY UPON ARRIVAL HOME. IN THE CASE OF OVERNIGHT TRIPS, HE/SHE WILL BE REQUIRED TO RETURN HOME IMMEDIATELY AT OUR EXPENSE AND RESPONSIBILITY. THE PARENT AND STUDENT ACKNOWLEDGE AND ACCEPT THE FOLLOWING EXPECTATIONS AS DETERMINED BY THE SCHOOL AND WILL ACCEPT THE CONSEQUENCES OF ANY VIOLATIONS.

1. NO ALCOHOLIC BEVERAGES OR OTHER USE OF DRUGS WHILE ON THE TRIP. IF THERE IS A VIOLATION, THE SCHOOL RULES WILL BE INVOKED. IN THE CASE OF OVERNIGHT TRIPS, THE PARENT WILL ACCEPT FINANCIAL RESPONSIBILITY FOR THE STUDENT'S RETURN HOME.
2. EACH STUDENT WILL RIDE IN THE VEHICLE PROVIDED FOR THE TRIP. ANY EXCEPTION TO THIS MUST BE MADE PRIOR TO THE TRIP AND AGREED TO BY THE ADVISOR, THE PARENT AND THE STUDENT.
3. THE SCHOOL RESERVES THE RIGHT TO NOT ALLOW A STUDENT TO GO ON A TRIP. THE STUDENT HAS THE RIGHT TO APPEAL THIS DECISION.

I AGREE TO ABSOLVE THE SCHOOL OF ANY LIABILITY WHICH MAY ARISE AS A RESULT OF THIS TRIP, AND HAVE PROVIDED SUITABLE INSURANCE. IN CASE OF ILLNESS OR INJURY, CONTACT ME OR:

(DATE) \_\_\_\_\_ (NAME) \_\_\_\_\_

(TELEPHONE) \_\_\_\_\_ (E-MAIL) \_\_\_\_\_

MEDICAL INSURANCE CARRIER AND PLAN NUMBER: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

EMERGENCY TELEPHONE NUMBER & NAME: \_\_\_\_\_

**please write legibly!**