

To: Lincoln-Sudbury Regional High School

This is to notify you that I have read the fact sheet for the trip  
to: SUNDAY RIVER 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 the 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

(Name) \_\_\_\_\_ (Telephone) \_\_\_\_\_

Medical Insurance carrier and plan number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

Lincoln-Sudbury Regional High School

Fact Sheet --- Overnight Trips

1. Activity: Overnight downhill ski/snowboard trip to Sunday River
2. Dates: March 14-16, 2008
3. Location: Sunday River Ski Resort

4. Phone number for emergencies: 1-800-286-4792

5. Description of the activity and facilities: We will leave Lincoln-Sudbury at 3:00 PM right after school on Friday March 14th. While at the mountain we will be staying in a dorm within walking distance of the slope. We will ski for two days and come back Sunday evening around 8-9:30 PM

6. School Supervisor (s): Shara Pilch, Alison Sanders-Flemming

7. Phone Contacts: Shara Pilch (978) 443-9961 x3422 or (978) 760-1263

8. Other Supervisors: \_\_\_\_\_

9. Number of students participating: Minimum: 35 Maximum: 44

10. Sleeping Accommodations: Dorm (Ski Cap Snow Dorm)

11. Insurance Required: \_\_\_\_\_

12 Food: All meals except for lunches and dinner Sunday night will be provided.

**Be sure to pack a sandwich for the ride up to Sunday River (Friday night).**

13. Financial Arrangements: \_\_\_\_\_

14. Costs: **Total cost \$260 if necessary add->**

Due by: <u>ASAP -&gt;</u>	The first to turn in this form and money will confirm their spot.	Ski Rental (2 day) = \$48
To: <u>LSRHS</u>		Ski Rental (1 day) = \$28
		Snowboard (2 day) = \$48
		Snowboard (1 day) = \$28

Refund Arrangements: None unless you can find someone to take your spot.

(over please)