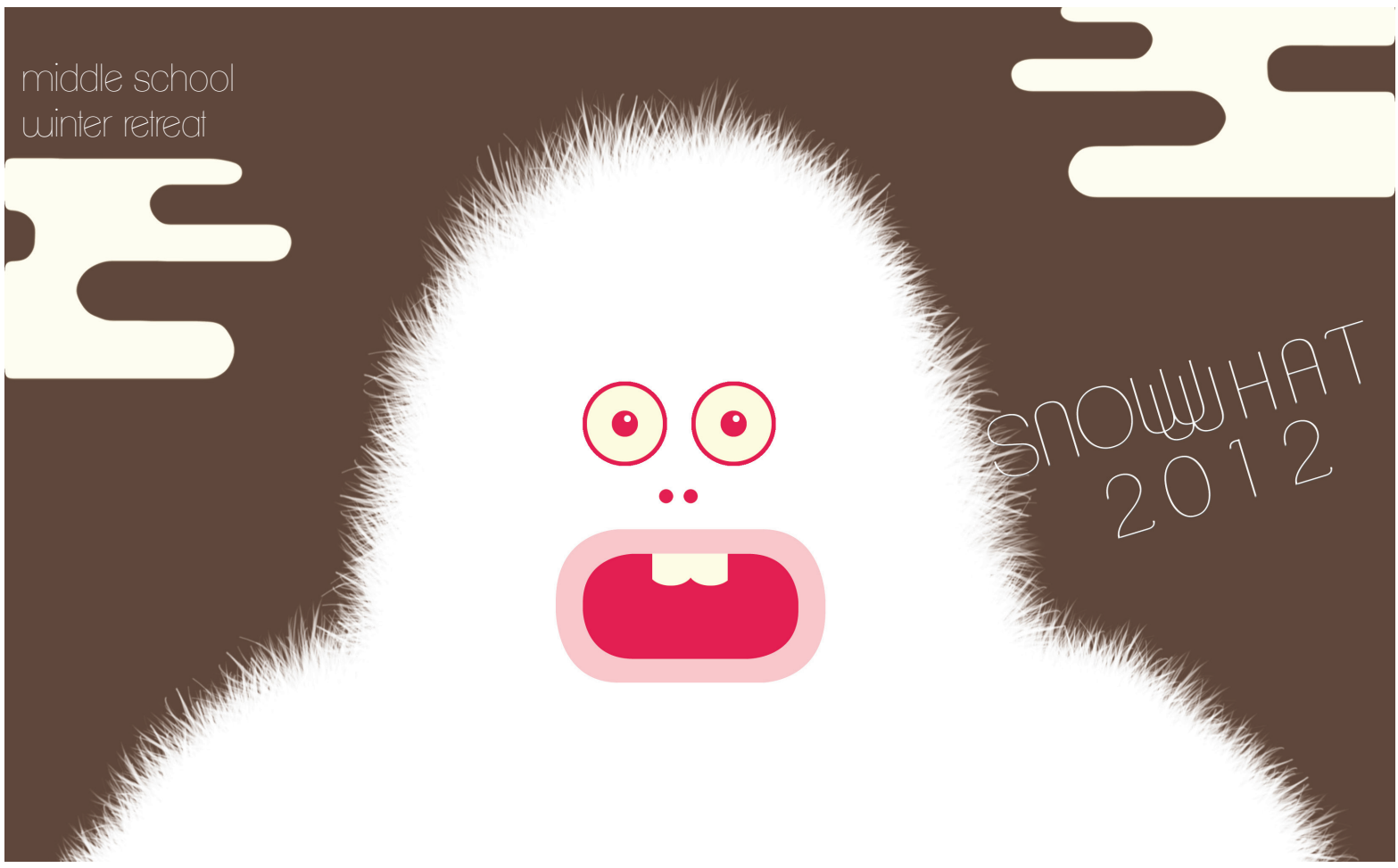
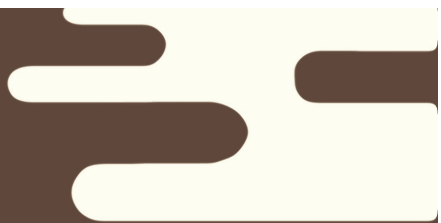


middle school
winter retreat



SNOWY HAT
2012

SNOW WHAT 2012

SUMMIT VIEW CHURCH

Mailing Address: 7701 NE 182nd Ave • Vancouver, WA 98682 • (360)260-8300 • www.summitview.net

STUDENT REGISTRATION & MEDICAL RELEASE FORM

WHO: Middle School Students

WHAT: Winter Retreat

INCLUDES: Tubing, skiing, snowboarding, spiritual discussion, live music, great food, and team competition.

WHERE : Eagle Fern Camp, Estacada, OR

WHEN: February 3-5, 2012

COST: \$85 Camp only
 \$98 Camp + Tubing
 \$100 Camp + Lift Ticket only (12 & under)
 \$102 Camp + Lift Ticket only (13 & older)
 \$104 Camp + Lift Ticket + Rental (12 & under)
 \$106 Camp + Lift Ticket + Rental (13 & older)

Note:
\$50 non-refundable deposit secures spot

(Tubing, skiing and snowboarding will be at Ski Bowl.)

LEAVE: Meet at Summit View Church Heritage Park Campus
 Friday, February 4, at 5pm 7701 NE 182nd Ave. Vancouver, WA 98682

RETURN: To the Heritage Park Campus, Sunday, February 5, at 2pm

BRING: Sleeping bag, pillow, Bible, notebook, pen, snow clothes and shoes, snowboards/skis, warm pajamas, gloves, personal hygiene stuff, flashlight, camera, snacks and a good attitude.

DON'T BRING: Weapons of any kind, tobacco, alcohol, drugs of any kind, personal electronics (e.g. CD players, MP3s, cell phones), a second suitcase and any other inappropriate material. If in doubt, leave it out.

CONTACT: Casey Graves or Tesa Schmidt, (360) 260-8300

Name of Event: Snow What Middle School Winter Camp
 Date of Event: Friday, February 3-5, 2012
 Address of Event: 37700 SE Camp Road, Estacada, Oregon

Student's Name: _____ Sex: M / F

- \$85 Camp only
- \$98 Camp + Tubing
- \$100 Camp + Lift Ticket only (12 & under)
- \$102 Camp + Lift Ticket only (13 & older)
- \$104 Camp + Lift Ticket + Rental (12 & under)
- \$106 Camp + Lift Ticket + Rental (13 & older)

Address: _____
 (street) (city) (state) (zip)

School: _____ Grade: _____ DOB: _____

Friend: _____

Parent(s)/Guardian(s) Names: _____ Phone: _____

Parent E-mail Address: _____

MEDICAL INFORMATION

Allergies: _____

Medication(s) taken: _____

Last Tetanus Shot: _____

Physical limitations: _____

Medical Insurance Company: _____

Policy Holder's name: _____ Policy #: _____

Student's Doctor: _____ Phone #: _____

EMERGENCY PHONE NUMBERS

Name/Relation 1: _____ Home #: _____ Work #: _____

Name/Relation : _____ Home #: _____ Work #: _____

LIABILITY RELEASE: I give permission for my child, as named above, to participate in Summit View Church's sponsored event, as named above, on the dates listed above. I hereby release Summit View Church, its employees, agents and volunteers from responsibility and liability for any illness or injury that the above named child may sustain during any activity.

MEDICAL RELEASE: In the event of an emergency, I hereby authorize an adult leader of the activity, as agent for me to consent to any x-ray examination; medical, dental, anesthetic, or surgical diagnosis; treatment; and hospital care advised and supervised by a licensed physician, surgeon or dentist (as appropriate) licensed to practice under the laws of the state where the services are to be rendered, either at the physician's office or in a hospital. I understand the activity director will endeavor to reach us should the nature of the injury or illness warrant it. However, we will not hold any of the activity personnel responsible if efforts to contact me (us) are unsuccessful. I further promise to hold harmless Summit View Church and/or its employees, agents and volunteers from any and all expense incurred pursuant to this authorization in obtaining medical treatment and/or transfer, including but not limited to: ambulance expense, cost of paramedics, hospital expense and/or physician charges.

MEDIA RELEASE: I understand and authorize that my child's image may be photographed or filmed and used in video presentations, and printed publications-either digital (online) or paper publications. Any exception must be received in written form prior to the date of the event.

IMPORTANT INSURANCE NOTE: In the event of an injury to the attendee, it is the policy of the church that the individual's insurance be primary and Summit View Church medical coverage be secondary.

Signature of parent/guardian _____ Date _____

initials of parent or guardian

initials of parent or guardian

initials of parent or guardian

initials of parent or guardian

OFFICE USE ONLY

Payment Info: Cash Check # _____ Amount: \$ _____ Date: _____

RELEASE KEPT ON FILE AT AREA

AGREEMENT OF RELEASE AND INDEMNITY FOR MT. HOOD SKI BOWL, LLC 2011-2012

PLEASE PRINT LEGIBLY. ALL FIELDS ARE REQUIRED.

PARTICIPANT: _____ AGE: _____ PHONE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL: _____

TEAM/GROUP NAME: _____ SKIING ABILITY: _____ (beginner, intermediate, advanced)

Please read carefully! This is a release of liability and waiver of certain legal rights.

Participant understands that skiing, snowboarding, ski and snowboard racing, snow tubing, snow play, snowmobiling, snowshoeing, event production, competitions, and any other use of Mt. Hood Ski Bowl, LLC's premises and facilities, including training, coaching, officiating, and volunteering (collectively referred to as "Sports Activities") can be hazardous and that injuries are common when participating in Sports Activities. Participant accepts and assumes the risks associated with Sports Activities, including, but not limited to, changing weather conditions, variations and steepness in terrain, terrain features and parks, snow or ice conditions, surface or subsurface conditions, bare spots, creeks and gullies, forest growth, rocks, stumps, the uses of lifts, collisions with natural or man-made objects or other persons, grooming and snowmobile equipment, lift towers and other structures and their components, falling, loss of control, the setting and location of race courses, and exceeding one's ability. Participant hereby freely and expressly assumes any and all risk of property damage, injury, and death associated with Sports Activities.

In consideration for the participation in any Sports Activities and the use of any other Mt. Hood Ski Bowl, LLC facilities and premises, Participant hereby agrees to release, hold harmless and indemnify Mt. Hood Ski Bowl, LLC and its owners, partners, employees, directors, officers, agents, affiliates, and related entities ("Ski Bowl") from any and all claims by or on behalf of Participant against Ski Bowl arising directly or indirectly out of Participant's participation in any Sports Activities and/or participant's use of Ski Bowl's facilities and premises. This release includes the claims and liabilities arising from any cause whatsoever, including, but limited to, negligence on the part of Ski Bowl. Participant also agrees to indemnify (including costs and attorneys fees) Ski Bowl for any claim brought on behalf of a minor named in this agreement.

I hereby irrevocably grant and convey to Ski Bowl all right, title and interest in and to record my name, image, voice, statements and/or writings including any and all photographic images and video or audio recordings at Ski Bowl. I further irrevocably grant to Ski Bowl, its advertisers, customers, agents, successors and assigns, unrestricted rights to use the above mentioned sound, still or moving images in any medium, including posting on the internet and word wide web, for educational, promotional, advertising, or other purposes without limitation consistent with the mission of Ski Bowl. I agree that all intellectual property rights to the sound, still or moving images belong to Ski Bowl. I voluntarily waive the right to inspect or approve such images and waive my right to any royalties, proceeds or other benefits derived from such photographs or recordings.

Permission to contact and use e-mail address: I accept and give permission to Ski Bowl and their subsidiaries permission to contact me about future offers, using the contact information I have provided. You may on occasion receive e-mail from Ski Bowl or subsidiaries, but will have the option to opt out of receiving further communications at any time by requesting to be placed on Ski Bowl or subsidiaries do not contact list. Ski Bowl and subsidiaries includes "all of the entities you will market from".

I have carefully read and understood this Agreement and all of its terms. I enter into this Agreement freely and voluntarily and agree that it will be binding upon me, my heirs, assigns, and legal representatives.

PARTICIPANT NAME: _____ DATE: _____ AGE: _____
(Please print legibly)

PARTICIPANT SIGNATURE: _____

Parent or guardian of Participant (must be signed by parent or legal guardian if Participant is under eighteen (18) years of age). As parent or guardian of the named Participant, I hereby agree to the indemnity provisions referred to above and I will be responsible for the payment of any medical expenses incurred by this minor.

PARENT OR GUARDIAN NAME: _____ DATE: _____
(Please print legibly)

PARENT OR GUARDIAN SIGNATURE: _____

MT. HOOD SKIBOWL LLC, IT'S AFFILIATES AND RELATED ENTITIES EQUIPMENT RENTAL AGREEMENT

87000 E. HIGHWAY 26 P.O. BOX 280 GOVERNMENT CAMP, OR 97028 (503) 272-3206

FIRST LETTER OF LAST NAME **PLEASE PRINT CLEARLY** NO. **AND COMPLETE ALL SHADED AREAS**

LAST NAME		FIRST NAME		M.I.	DATE
STREET ADDRESS				PHONE ()	
CITY		STATE	ZIP		E-MAIL
LOCAL ADDRESS				LOCAL PHONE	

WEIGHT LBS	HEIGHT FT IN	AGE	CIRCLE SKIER TYPE I II III	SEX M <input type="checkbox"/> F <input type="checkbox"/>	LEFT FOOT FORWARD REGULAR <input type="checkbox"/>	RIGHT FOOT FORWARD GOOFOY <input type="checkbox"/>	SHOE SIZE
---------------	-----------------	-----	-------------------------------	--	--	--	-----------

ACCEPT INITIALS _____ DECLINE INITIALS _____
INSURANCE AGAINST DAMAGE \$1.00 FOR RECREATION EQUIPMENT, \$2.00 FOR SPORT OR PERFORMANCE EQUIPMENT. (DOES NOT COVER LOST, STOLEN OR ABUSED EQUIPMENT)

SKI EQUIPMENT RECREATION SKI ADULT SKI PACKAGE <input type="checkbox"/> ADULT SKI ONLY <input type="checkbox"/> JUNIOR SKI PACKAGE <input type="checkbox"/> JUNIOR SKI ONLY <input type="checkbox"/> SPORT SKI ADULT SKI PACKAGE <input type="checkbox"/> ADULT SKI ONLY <input type="checkbox"/>	SNOWBOARD EQUIPMENT RECREATION SNOWBOARD ADULT SNOWBOARD PACKAGE <input type="checkbox"/> JUNIOR SNOWBOARD PACKAGE <input type="checkbox"/> RECREATION BOOT ONLY <input type="checkbox"/> PERFORMANCE SNOWBOARD SNOWBOARD PACKAGE <input type="checkbox"/> BOARD ONLY <input type="checkbox"/> PERFORMANCE BOOT ONLY <input type="checkbox"/>	MISCELLANEOUS CLOTHING PACKAGE <input type="checkbox"/> JACKET ONLY <input type="checkbox"/> PANTS ONLY <input type="checkbox"/> POLES ONLY <input type="checkbox"/> SNOW SKATE <input type="checkbox"/> SKI SCHOOL SKI PACKAGE <input type="checkbox"/> SKI SCHOOL SNOWBOARD PCKG <input type="checkbox"/> OTHER _____ <input type="checkbox"/>
--	--	---

FOR SHOP USE ONLY

BOOT #	SOLE LENGTH/MM	SKI/SNOWBOARD DESCRIPTION	SKIER CODE	VISUAL IND. SETTINGS		TECH INITIAL	RETURNED TO:
				LEFT TOE HEEL	RIGHT TOE HEEL		
2ND BOOT #	SOLE LENGTH/MM	2ND SKI/SNOWBOARD DESCRIPTION	SKIER CODE	VISUAL IND. SETTINGS		TECH INITIAL	RETURNED TO:
				LEFT TOE HEEL	RIGHT TOE HEEL		

SNOW SKATE RETURNED TO: CLOTHING JACKET # _____ PANTS # _____
 RETURNED TO: POLES NO SHOP NOTES

CASH MC VISA AMEX DISCOVER BOWL BUCKS TIME DUE 4:30 7:00 10:00 11:00 CASHIER'S INITIALS

TYPE OF DEPOSIT _____ AMOUNT OF DEPOSIT _____ CUSTOMER'S INITIALS _____
 I have returned all my equipment. Any deposit that was given has been returned / my credit card will not be charged & I have received the white copy of my rental form as proof.

ACKNOWLEDGEMENT OF PERSONAL INFORMATION & EQUIPMENT INSTRUCTIONS
 I have accurately represented the above listed information and it is true and correct. I have been instructed on the use of my equipment. I have been informed that ski check is FREE and have verified that the binding settings indicated above are those appearing on the binding. All snowboard bindings are equipped with a leash and I am responsible for returning it. USER'S INITIALS

EQUIPMENT RENTAL & LIABILITY RELEASE AGREEMENT

I accept for use AS IS the equipment listed on this form, and accept full financial responsibility for the care of the equipment while it is in my possession. I will be responsible for the replacement at full value of any equipment rented under this form, but not returned to the rental facility. I agree to return all rental equipment by the agreed date.
 I understand that the binding system cannot guarantee the user's safety. In downhill skiing, the binding system will not release at all times or under all circumstances where release may prevent injury or death, nor is it possible to predict every situation in which it will release. In snowboarding, cross-country skiing, skiboarding, snowshoeing and other sports utilizing equipment with non-release bindings, the binding system will not ordinarily release during use; these bindings are not designed to release as a result of forces generated during ordinary operation.
 I understand that the sports of skiing, snowboarding, skiboarding, snowshoeing and other sports (collectively "RECREATIONAL SNOW SPORTS") involve inherent and other risks of INJURY or DEATH. I voluntarily agree to expressly assume all risks of injury or death that may result from these RECREATIONAL SNOW SPORTS, or which relate in any way to the use of this equipment.
 I understand that a helmet designed for RECREATIONAL SNOW SPORTS use will help reduce the risk of some types of injuries to the user at slower speeds. I recognize that serious injury or death can result from both low and high energy impacts, even when a helmet is worn.
 I AGREE TO RELEASE AND HOLD HARMLESS MT. HOOD SKIBOWL LLC, its employees, owners, affiliates, related entities, agents, officers, directors, and the equipment manufacturers and distributors and their successors in interest (collectively "PROVIDERS"), from all liability for injury, death, property loss and damage which results from the equipment users participation in the RECREATIONAL SNOW SPORTS for which the equipment is provided, or which is related in any way to the use of this equipment, including all liability which results from the NEGLIGENCE of PROVIDERS, or any other person or cause.
 I further agree to defend and indemnify PROVIDERS for any loss or damage, including any that results from claims or lawsuits for personal injury, death, and property loss and damage related in any way to the use of this equipment.
 This agreement is governed by the applicable law of this state or province. If any provision of this agreement is determined to be unenforceable, all other provisions shall be given full force and effect.

I THE UNDERSIGNED, HAVE READ AND UNDERSTAND THIS EQUIPMENTAL RENTAL & LIABILITY RELEASE AGREEMENT.

Parent/Guardian: If equipment user is a minor, I verify that I am the parent or guardian of the minor, and I have authority to enter into this agreement on behalf of the equipment user and I agree to be bound by the terms and conditions of this agreement.

PARENT/GUARDIAN SIGNATURE