

**West Boylston Middle/High School
Ski and Snowboard 2017
6 Weeks – Mondays January 9, 23, 30 and February 6,13, 27**



Order Online **ONLY!**

<http://wachusett.com/GroupSales/SchoolGroups/SchoolBadgePassOrderOnline/>

CODE: wboyl

Registration begins October 1, 2016

You must register online to enroll in ski club, even if you already have a pass. If you have purchased one through one of our other programs, just let us know with the "already have a lift badge or season pass" checkbox at the site.

Deadline is December 1, 2016

Badges/Passes

Rentals

Lessons

Cow cards

**See the web site for details and
2016-2017 prices**

***** PARENTS***** – you may also purchase a century pass through ski/snowboard club. No user fee or other forms needed. Just fill out the student online application.

Fill out and return the attached paperwork by Friday, December 2, 2016

- **Signed expectation sheet (attached)**
- **Permission slip (attached)**
- **Signed Liability and Indemnity form (attached)**
- **\$75 payment for user fee.**

Make checks out to West Boylston Public Schools.

The Bus



All 6 week pass holders must ride the bus.

If you have a season pass the bus is optional.

The bus will be filled on a first come, first served basis.

Students who are involved in winter sports at WBMHS may not purchase a 6 week pass to go with us on Mondays because of possible conflicts with your winter sport.

However, you can purchase a season pass and go on your own time.

Questions?

Email Lynnepelto@wbschools.com

Ski/ Snowboard Club 2017 Expectation Sheet

BUSES:

- Bus will leave at **2:15** promptly.
- You may be assigned seats on the bus.
- You must return to the school on the bus unless Mrs. Pelto or one of the chaperones has a **written note from a parent or sees you with a parent** at the mountain.
- There is no eating or drinking on the buses.
- You **must** be on the bus at **5:55** (if you are late you will cause the school to get charged for extra bus time).
- All students should arrange for someone to pick them up at the school at **6:20**.
- Student **may not walk inside the school with ski or snowboard boots on**. Ski club members must exit and enter the building by the outside cafeteria doors. To walk in the hallway or lobby area, student must change from ski boots to shoes.

PASSES:

- 6 week passes will be distributed on the bus on the first day.
- 6 week passes will be collected on the bus on the way back to the school.
- Students that buy a century pass should pick it up at the mountain prior to the first day of ski/snowboard club (you will keep these passes).

BEHAVIOR:

- It is expected that students will behave appropriately both on the bus, in the lodge and on the mountain.
- Students shall follow the direction of chaperones and Mt Wachusett employees at all times.
- Students shall be courteous to other skiers and boarders at all times on the mountain.
- Misbehavior on the bus or at the mountain will result in the student's loss of bus and/or ski/snowboard privileges for *at least* one week.

WHERE TO PUT YOUR STUFF DURING SCHOOL:

- Skies, snowboards, and poles outside by the wall next to the gym. Please do not block the front doors.
- Bags outside of room 100 (at the end of the entry hallway)

QUESTIONS???

MRS. PELTO, PROGRAM COORDINATOR (ROOM 402) phone x127

Email Lynnepelto@wbschools.com

Signatures:

Student _____

Parent _____ Date _____

Major Edwards School
508 835-4461

Middle/High School
508 835-4475

West Boylston Public Schools
125 Crescent
Street
West Boylston, Massachusetts 01583



SKI/SNOWBOARD CLUB PERMISSION FORM

STUDENT: It is understood that I will conduct myself in a manner that will bring credit to my school.

X _____
Student signature Grade

PARENT/GUARDIAN: This is to certify that my son/daughter _____

- 1. has my permission to go with SKI/SNOWBOARD CLUB 2017
to MT WACHUSETT
on Mondays January 9, 23, 30 and February 6, 13, 27

COST: **\$75 USER FEE PLUS LIFT TICKET**

- 2. is covered by school insurance or other comparable insurance.

Name of Ins. Co. _____ Insurance # _____

- 3. has the following medical condition/s you should be aware of: _____
- 4. The West Boylston chaperones are authorized to obtain emergency medical care as necessary.
- 5. needs to take the following medications on the trip.

Medications: MUST BE IN ORIGINAL CONTAINERS WITH PHARMACY LABELS INTACT

Name	Amount	Time	Reason
Prescription Name	Dosage	Time/s to be given	Reason

Parent Signature X _____ Date _____

Contact information:

Home Phone	Mom Work phone	Father Work Phone	Cell phone number

WEST BOYLSTON PUBLIC SCHOOLS

PARENTAL / STUDENT CONSENT, RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT

I, the undersigned parent/guardian/legal representative of _____
Student's Name

do hereby consent to his/her participation in voluntary athletics, extra-curricular activities, and/or trips, and in consideration of his/her being permitted to so participate, I, on behalf of myself, my

heirs, my agents, my representatives, and on behalf of _____
Student's Name

do forever RELEASE, acquit, discharge, and covenant to hold harmless the Town of West Boylston, and its employees, servants and agents, as well as the West Boylston Public School Committee, its former and current members, and its employees, servants and agents, from any and all actions, rights of actions, causes of action, charges, and/or claims, in any way related to, arising from and/or growing out of, directly or indirectly, all known personal injuries or property damage or death, which I may now or hereafter have as the parent/guardian/legal representative of said minor, as well as any actions, rights of action, causes of action, charges, and/or claims which said minor has or hereafter may acquire, either before or after he/she reaches the age of majority, resulting from, relating to, or in any way connected to, his/her participation in athletics, extra-curricular activities and/or trips run by, sponsored by or related to the Town of West Boylston Public Schools.

In addition, I, as parent/guardian/legal representative of said minor, agree to indemnify the Town of West Boylston, and its employees, servants, and agents, as well the West Boylston School Committee, its former and current members, and its employees, servants and agents, in the event that any action, charge, and/or claim, is brought against the foregoing, which in any way related to, arising from and/or growing out of, directly or indirectly, my son/daughter's participation in athletics, extra-curricular activities and/or trips run by, sponsored by or related to the Town of West Boylston Public Schools.

Signature of Parent

Date

Signature of Student

Date