

It's a Ski Trip!

WHO: Youth in Grades 6th –12th

WHEN: Sunday Jan. 16th, 2011

WHERE: Sundown Ski Resort
Dubuque, IA.

TIME: 1:00PM – 10:00PM

We will leave and arrive back at
St. Mary's parking lot.

COST: \$60.00 skis/pass/lift

\$45.00 pass/lift only

\$65.00 snowboard/pass lift

Please fill out the attached permission form and
return to:

Patti McTaggart:

St. Mary's Church

302 East Jefferson Street

Iowa City, Iowa 52245

Make all checks payable to: **St. Mary's Youth Group**

THE DEADLINE IS MONDAY, JANUARY 10th, 2011

ACT NOW! THE SPACES FILL UP QUICKLY! THANK YOU!



DIOCESE OF DAVENPORT PARENT/LEGAL GUARDIAN PERMISSION SLIP

Dear Parent or Legal Guardian:

Your son/daughter, legal dependant, is eligible to participate in a school-sponsored or Religious Education Program activity at a location away from the school/parish site. This activity will take place under the guidance and supervision of **St. Mary's Parish Youth Program**. A brief description of the activity follows:

Activity: St. Mary's Sponsored Ski Trip

Purpose: Annual event

Destination: Sundown Ski Resort - Dubuque, Iowa

Designated Supervisor of Activity: Patti McTaggart

Volunteer Chaperone(s): TBA (1 adult to 6 youth ratio)

Place of Departure: St. Mary's Parking Lot

Date and Time of Departure: Sunday, January 16th 1:00PM

Place of Return: Pick-up at St. Mary's Parking Lot

Date and Anticipated Time of Return: Sunday January 16th 10:00PM

Method of Transportation: Chartered Buses

Student Cost: \$60.00 for Bus, Pass, & Skis \$45.00 for Bus & Pass only
\$65.00 for Buss Pass, Snowboard

If you would like your child to participate in this event, please complete, sign and return the following statement of consent. As parent, or legal guardian, you remain fully responsible for any legal responsibility that may result from any personal actions taken by the named student. I hereby request and consent to the participation of my child____, in the event described above. I understand that this event will take place away from the school/parish grounds. I further consent to the conditions stated above on participation in this event, including the method of transportation.

Parent/Legal Guardian Signature

Date

Address

Emergency Phone Number

+++++++INFORMATION NEEDED BY SUNDOWN SKI RESORT+++++++

Shoe/Ski Size (same) _____

Skill Level (please circle one): **Beginner** **Intermediate** **Advanced**

Height: _____ Weight: _____ Age: _____