ALPINE SKIING PERMISSION SLIP

TROOP98/VENTURE CREW 98

Alpine Skiing in its various forms is a hazardous sport that has many dangers and risks. I realize that injuries are a common and ordinary occurrence of this sport. I agree, as a condition of being allowed to participate in a ski trip with Troop98/Venture Crew 98 that I freely accept and voluntarily assume all risks of personal injury or death or property damage, and release the Scoutmasters/Venture Crew Advisors, adult chaperones, Rosemont Baptist Church and its agents, employees, directors, officers, and leadership from any and all liability for personal injury or property damage which results in any way from negligence, conditions on or about the premises and facilities of the ski area, church grounds or facilities, and transport vehicles (school bus, church bus, or leaders and chaperones personal cars or trucks), accepting myself the full responsibility for any and all such damage or injury of any kind which may result.

I, the undersigned, have read and understand the terms of the above release agreement. I am signing it freely and of my own accord realizing it is binding upon myself, my heirs and assigns, and in the event that I am signing on behalf of any minors, that I have full authority to do so, realizing its binding effect on them as well as myself.

As a condition of participating in a Troop 98/Venture Crew 98 Alpine Ski Trip, I further agree to assume all risk of personal injury or loss or damage to any of my property.

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

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

(Parent or Guardian if Minor under 18)

I give permission for the Scoutmasters/Venture Crew Advisors and adult leadership to seek medical attention for:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ In the event they feel it necessary.

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

(Parent or Guardian if Minor under 18)