

ST. WILLIAM YOUTH GROUP
invites the entire parish family to
FAMILY NIGHT AT THE FRIDGE



SUNDAY, FEBRUARY 17, 2008
6:15 – 8:30 PM
COST: \$6.00 PER PERSON
& SNACK TO SHARE

THE FRIDGE is Michigan's first refridgerated toboggan run, located in Waterford Oaks Park. Toboggans are provided and are transported by park staff to the tower. Up to four riders swoosh down a 55 foot drop, and zip along 1000' at speeds in excess of 30 miles per hours.



Gloves or mittens are required.
Wear clothing suitable for an outdoor activity.

Riders must be 30" tall. Children under 43" tall must be accompanied by an adult. "Lookout Lodge" is a warming building with a fireplace and restrooms.

We will meet in
Look-Out Lodge at 6:15 PM
to sign in and receive your passes.

REGISTRATION DEADLINE 2-10-2008
PARENT PERMISSION FORM FOR FIELD TRIP
PARTICIPATION

Dear Parent or Legal Guardian,

Your child is eligible to participate in a youth ministry sponsored activity requiring transportation to a location away from the parish premises. This activity will take place under the guidance and supervision of employees and volunteers from St. William Parish. A brief description of the activity follows:

Name of Event: Family Night at the **FRIDGE**

Destination: Waterford Oaks Park (Scott Lake Road, between Dixie Hwy. & Watkins Lake Road)

Designated Supervisor of Activity: Marge Shackett, Youth Minister

Date and Time of Event: Sunday, February 17, 2008 6:15 – 8:30 PM
We will meet in the Look-Out Lodge at 4:45 PM to sign in.

Method of Transportation: Parents are responsible for transportation to and from Waterford Oaks.

Cost: \$6.00 per person and a snack to share!

If you would like to participate in this event, please complete, sign, and return this form, with payment by February 10, 2008. Make checks payable to: St. William Use one form for the entire family!

STATEMENT OF CONSENT
I hereby consent to participation by my child, _____, in the event described above scheduled for _____. I understand that this event will take place away from parish grounds. I further consent to the conditions stated above on participation in this event, including the method of transportation.
In consideration of my child being allowed to participate in this event, I agree to indemnify and hold harmless St. William Parish, any and all affiliated organizations, its/their employees, agents, representatives, volunteers and drivers, from any and all claims I or my child may have, excluding claims for intentional misconduct or gross negligence, arising from or relating to my child's participation in this event.
I authorize St. William Parish to obtain necessary medical treatment for my child in case of illness, injury or accident. My child has the following medical conditions or allergies about which a health care provider should be told _____ none _____
During this event I can be reached at _____ or call Name _____ Relationship to child _____ Phone _____ Insurance Company _____ Policy Number _____ Physician's Name _____ Phone _____

First Name: _____ Last: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Grade: _____ Birthdate: _____ Email: _____

Parent Signature: _____ Date: _____