



Daysland Alliance Youth

For you are all children of light, children of the day. We are not of the night or of the darkness.

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Skiing at Valley Ski Hill

March 7, 2025

DAYSLAND ALLIANCE YOUTH REGISTRATION/CONSENT FORM

ATTENTION: YOUTH PARENTS OR GUARDIANS

WE ARE EXCITED THAT YOUR CHILD (CHILDREN) IS PLANNING ON ATTENDING THE SKI NIGHT AT VALLEY SKI HILL (BY ALLIANCE, ALBERTA) AS PART OF THE DAYSLAND ALLIANCE YOUTH GROUP. IN ORDER FOR THEM TO ATTEND, WE REQUIRE YOU TO COMPLETE THIS FORM, SIGN IT AND **RETURN IT TO KIRBY SCHMIDT-TEIGEN** ON THE FRIDAY OF THE EVENT.

I, _____ (PARENT/GUARDIAN), GIVE PERMISSION FOR

_____ (CHILD'S NAME)

_____ (CHILD'S NAME)

_____ (CHILD'S NAME)

TO ATTEND THE SKI TRIP TO VALLEY SKI HILL WITH THE DAYSLAND ALLIANCE YOUTH, IT'S PASTOR AND OTHER LEADERS/CHAPERONES, AND TO TAKE PART IN THE ACTIVITIES OF THE TRIP. I UNDERSTAND THE ACTIVITIES OF THE TRIP ARE NOT LIMITED TO, BUT WILL INCLUDE, TRAVELING TO AND FROM THE EVENT IN THE CHURCH VAN OR LEADERS/CHAPERONE'S VEHICLE, SKIING AT VALLEY SKI HILL, EATING SNACKS AND PLAYING GAMES. I RELEASE DAYSLAND ALLIANCE CHURCH, ITS EMPLOYEES, VOLUNTEERS AND CHAPERONES FROM RESPONSIBILITY FOR ACCIDENTS AND INJURIES THAT OCCUR WHILE PARTICIPATING IN THE EVENING ACTIVITIES. I UNDERSTAND THAT THIS INCLUDES ANY SICKNESS THAT IS PERCEIVED TO HAVE BEEN CONTRACTED OR IS CONTRACTED DURING THE DATES SPECIFIED. WHILE ON THE SKI HILL, I UNDERSTAND MY CHILD(S) MAY BE SKIING WITHOUT A CHAPERONE, BUT WILL BE ENCOURAGED TO SKI IN GROUPS OR PAIRS, BUT I AM AWARE THAT THIS WILL NOT BE MONITORED AND RELEASE DAYSLAND ALLIANCE CHURCH, IT'S PASTORS, STAFF, AND OTHER LEADERS/CHAPERONES FROM RESPONSIBILITY.

SIGNATURE

DATE

PERSONAL INFORMATION

NAME: _____ AHC#: _____ - _____
ALLERGIES: _____

NAME: _____ AHC#: _____ - _____
ALLERGIES: _____

NAME: _____ AHC#: _____ - _____
ALLERGIES: _____

EMERGENCY CONTACT: