

# WACHUSETT MT SKI / SNOWBOARD PROGRAM

The Medway Secondary Parent Teacher Organization (MSPTO) is once again offering the opportunity to ski/snowboard at Wachusett Mountain Ski Area in Princeton, MA this winter. This program will run six consecutive weeks, skipping Jan. 12<sup>th</sup> due to MLK weekend, on Friday afternoons beginning January 4, 2019.

The program is paid directly to Wachusett Mountain – *see attached brochure for options*. The minimum fee to Wachusett will be \$140 (\$120 for the six week lift badge plus \$20 Friday night program). You may add equipment rental fees and lessons. Equipment fittings will be done once we arrive the first night.

A separate check for \$124 needs to be submitted to MSPTO for transportation. This includes a luxury coach bus to and from the mountain. Chaperones will be riding the bus and be available at the mountain. The buses depart for Wachusett Mountain at the end of the school day on Friday, and are returned to the school at approximately 9:00 PM that night.

**Participation in this program and rental equipment availability will be determined on a first-come, first-served basis. In the past we have been oversubscribed and forced to turn students away, so please respond quickly!**

**The deadline for applications is Decemer 15, 2018.**

The Registration must be done on-line through Wachusett:

Parents Step ONE: go to [www.wachusett.com/schoolgroups](http://www.wachusett.com/schoolgroups)

Parents Step TWO: **Enter this Code: [MWMS](#) to access your program's form.**

The Liability Waiver / Medical Consent Form must be returned with full payment by December 15, 2018 to the address listed below. Due to school policies, you **MUST** mail your application. **It cannot be handed in at the school.**

**For any questions, please contact Lisa Paulette at [lisa.paulette@commonmoves.com](mailto:lisa.paulette@commonmoves.com) or 617-967-5890**

**We look forward to seeing you on the slopes!**

\*\*\*\*\*

**DATES TO REMEMBER**

Deadline for registration and payment:	December 15, 2018
First day to have fun!	January 4, 2019
Full Program Dates	Jan 4, Jan 11, Jan 25, Feb 1, Feb 8, Feb 15 (make-up day March 1, if necessary and weather permitting)

\*\*\*\*\*

**COSTS**

**Program FEE minimum** ..... **\$140** (minimum)  
*(important, you may add optional choices; such as a season pass, equipment rental, and lessons on the mountain's website)*

**Transportation FEE (check payable to MSPTO , non-refundable)**..... **\$ 124**

Complete the attached Wachusett /Brochure online, MSPTO Liability Waiver / Medical Release Form, and include the transportation check listed above. **Mail Waiver & Transportation Check:**

MSPTO Ski/Snowboard Program  
c/o Lisa Paulette  
206 Main Street  
Medway, MA 02053

MEDWAY SECONDARY PARENT TEACHER ORGANIZATION

WACHUSETT MT. SKI/SNOWBOARD PROGRAM

PERMISSION, REGISTRATION AND LIABILITY WAIVER / MEDICAL CONSENT FORM

As parent/legal guardian, I hereby grant permission for \_\_\_\_\_ to participate in the MSPTO Wachusett Mountain Ski/Snowboard Program, which begins January 4, 2019. As part of my permission, I agree to hold harmless and release from any and all liability whatsoever for any accident, injury or loss that my child or I may sustain as a result of participating in this program the Medway Middle School, the Medway Parent Teacher Organization (MSPTO), the program organizers, their contractors, and all chaperones. Any excess funds will be used towards MSPTO activities at the Middle and High Schools.

Furthermore, as parent/legal guardian, I hereby grant my consent for the administration of emergency medical care including, but not limited to, care by any duly licensed medical doctor or dentist. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my child. I assume all legal and financial responsibility for any expenses or charges incurred on behalf of my child in the course of treatment.

Please mail this form on/before December 15, 2018 [First come, first served basis as buses are filled]

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_ ! ! ! !

Address \_\_\_\_\_ GRADE

Phone Number \_\_\_\_\_ Alternate/Emergency Phone \_\_\_\_\_ e-mail \_\_\_\_\_ Health Insurance Co.: \_\_\_\_\_ Policy# \_\_\_\_\_

CHAPERONES

We need skiing/snowboarding and non-skiing/snowboarding volunteer chaperones every week. WITHOUT CHAPERONES, OUR PROGRAM CANNOT RUN. Chaperones ride the bus both ways and are allowed to ski or board free! All chaperones will be required to file a CORI form and undergo a criminal history background check. Thank you for your support. You will be contacted by an organizer when and as needed. Priority will go to those who can attend all 6 weeks.

Volunteer (please print): \_\_\_\_\_ Phone \_\_\_\_\_ cell # \_\_\_\_\_ e-mail \_\_\_\_\_

CORI on file? YES \_\_NO \_\_

Please circle the dates(s) available: JAN 4 - JAN 11 - JAN 25 - FEB 1 - FEB 8 - FEB 15

\_\_\_\_\_ Skiing chaperone \_\_\_\_\_ Boarding Chaperone \_\_\_\_\_ Non-skiing or -boarding chaperone