

## Parental Permission

\_\_\_\_\_

(student's name)

has my permission to participate in the  
***2019 WFMY High School Ski Retreat at Perfect  
North Slopes in Lawrenceburg, IN.***

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

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

## Student Contract

I agree to follow all rules and guidelines during the ski retreat. I further agree to cooperate with all adult volunteers.

Student's Name: \_\_\_\_\_

Student's Signature: \_\_\_\_\_

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

Thank you! It is going to be a great trip!!  
~Pastor Andrea



WFMY High School Ski Retreat  
January 18-20, 2019  
Perfect North Slopes

## What you need to know...

### Cost: \$125.00

Cost covers ski lift ticket, ski rental (either skis or snow board and helmet), lodging (breakfast on Sat/Sun included), and dinner Saturday night. You will need money for dinner on Friday night and if you'd like to purchase items at the lodge on Saturday.

**Deposit (\$25) due 1/9/19; Balance due 1/13/19.**

### Ski Location: Perfect North Slopes

19074 Perfect Lane, Lawrenceburg, IN 47025  
Phone: 812-537-3754

### Lodging: Country Inn and Suites Cincinnati-Airport

759 Petersburg Road, Hebron, KY 41048,  
Telephone: (859) 689-0700

### Registration Forms

- Registration form and \$25 deposit due January 9, 2019.
- Med release form and ski waiver must be signed and turned in along with final payment by January 13, 2019.

### What else??

- We'll meet at WFMC on Friday, January 18 @5pm.  
Anticipated departure time: 5:30pm.
- Bring board game, bathing suit (pool and hot tub available at hotel), clothes for lengthy day in snow.
- Bring a easy to eat snack (granola bars, fruit snacks, crackers, etc) for the slopes on Saturday. We'll bring water and gatorade.
- Schedule and Final Details will be available January 16, 2019

@ the **Parents Meeting (8pm) in Building C,  
Room C203.**



**Questions: Pastor Andrea Tinsley, Youth Pastor**

**Office: (859)858-3521 Cell: (931)212-8083**

**Email: [atinsley@wfmc.net](mailto:atinsley@wfmc.net)**

Detach and return to Andrea by January 9.

Registration Form		
<b>Name:</b>	<b>Grade:</b>	
<b>Parent's Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Home Phone:</b>	<b>Cell:</b>	
<b>Email:</b>		
<b>Roommate Request:</b>		
For Andrea's Use:		
_____ Current Medical Release Form on File		
\$ _____ Received on _____		
\$ _____ Remaining Balance		