

**Calvin Christian School Annual Ski Trip**  
*Horseshoe Resort, Barrie*

Hello Skiers / Snowboarders / Tubers;

We are pleased to once again offer our annual Ski Trip to grade 7 and 8 students on the PD day, Friday, February 17th. This year it will be at a NEW location - Horseshoe Resort. The plan is to leave school by bus at 7:00 AM and return to school around 7:00 PM that same evening. We will make a short stop at the OnRoute in Vaughan for a washroom break and food on the way home.

Please note that although a chaperone will be available in each chalet, it is not possible to provide one on one supervision for students.

Safety is an important priority for all the sports offered. All students with previous skiing or snowboarding experiences are given the opportunity to demonstrate their ability on a stripe test. Those unsuccessful with their stripe test, or who are new to the sport, will be directed to lessons with certified instructors. As students develop the appropriate skills, they will graduate to the appropriate hills. All students and chaperones **MUST WEAR HELMETS**. This is a mandatory component of group rentals. They are included as part of the package unless you have your own approved helmet.

**Horseshoe Resort requires that a parental consent form and group waiver are signed by each student. Horseshoe Resort will not allow any access to its facilities unless this waiver has been signed.** In addition to the waiver, Horseshoe Resort has a policy that if their rental equipment is damaged due to poor or inappropriate use by the renter, the replacement cost is assumed by the renter. CCS also requires that you fill in a waiver form in order to participate in this trip.

Please fill in the Ski Trip Forms – one form per student and ONE choice of activity. A combination of activities is not allowed as abilities for different events require different tests. Please indicate your choice on the sheet and **send it back to the school by Thursday, January 19th**, with a **cheque** payable to Calvin Christian School **or E-transfer** ([payment@ccshamilton.ca](mailto:payment@ccshamilton.ca)) and a completed signed waiver form so that we can confirm our numbers as soon as possible. In case of cancellation due to conditions or weather, the cheques will be shredded and e-transfer amounts returned.

Finally, Horseshoe Resort allows us one chaperone for each group of 10 students. If you would like to come along for the day as a chaperone please sign at the bottom of this form and return to the school by Thursday, January 19th. Please also fill in your own set of waiver forms. You will be notified by February 3, 2022, of what our needs are. All parents selected as chaperones will take turns being on the hill, in the chalet, and at the tubing facility. Please also indicate if you are available to drive and possibly accommodate equipment in your vehicle.

If you are selected as a chaperone, you are able to attend for free, rentals included. If you are not selected as a chaperone, but would still like to attend, the cost to you is \$27.

Please be mindful that the number of students participating determines the number of chaperones that we can take. We may be able to take additional parents as space permitted.

For more information, please visit Horseshoe's website at [www.horseshoeresort.com](http://www.horseshoeresort.com).

Copies of each of the included forms will also be available on the school website.

Thank you,

Mrs. C. Mantel

-----fill in only if requesting to be a chaperone-----

I, \_\_\_\_\_ (please print) would like to submit my name for consideration to be a chaperone for this trip. Preferred email for communication: \_\_\_\_\_.

I am / am not (please circle one) willing to drive and accommodate equipment and possibly students in my vehicle. *Please note, in order to be eligible to drive, you must have 2 million in insurance liability.*

Participant Name \_\_\_\_\_

Please mark your selections (skiing, OR snowboarding, OR tubing), total, and attach a cheque payable to CCS or pay by e-transfer. Be sure to sign and return the waiver forms for each participant. Chaperones do not need to pay but must indicate their rental needs. Additional forms can be printed from the school website.

Prices Per Activity

Item	Circle for Student Selection	Chaperone Selection (check off selection)	Parent price (if not selected as chaperone)
Ski equipment, Helmet rental, lift ticket, lesson	\$65	<input type="checkbox"/>	\$39
Snowboarding equipment, Helmet Rental, lift ticket, lesson	\$65	<input type="checkbox"/>	\$39
Tubing and Helmet Rental, lift ticket	\$45	<input type="checkbox"/>	\$17
Ski / Boarding Lift ticket only	\$50	<input type="checkbox"/>	\$27
Total:	\$ _____		\$ _____

Students, please indicate which method of payment you are using (check one). If you are hoping to attend as a chaperone, please do not include payment now, but please fill in and send in all waiver forms.

- cheque (included)
- e-transfer (payment@ccshamilton.ca)



571.2

## Calvin Christian School Field Study/Recreational Activity Information/Acknowledgement/Permission Form

At Calvin Christian School, we are pleased to offer opportunities outside of school that complement our school programs, opportunities that enrich the school experience and allow our students to “shine”. We also prioritize safety while on a trip. All students require parent or guardian permission to participate in out-of-school trips, as evidenced by completing this form.

### PLEASE READ CAREFULLY

My child will be given the opportunity to participate in the following off-site event/activity:

<b>Date of Event/Activity:</b>	<b>Friday, February 17th</b>		
<b>Destination Address:</b>	<b>Horseshoe Resort 1101 Horseshoe Valley Road, Barrie, ON, L4M 4Y8</b>		
<b>Description of Event:</b>	<b>Ski, Snowboarding or Tubing Trip for grade 7 &amp; 8</b>		
<b>Special Information:</b>	<b>Although a chaperone will be available in each chalet, it is not possible to provide one on one supervision for students.</b>		
<b>Supervising Teacher(s):</b>	<b>Mrs. Mantel, Mr. Schaefer</b>		
<b>Expected Departure Time:</b>	<b>7:00 am</b>	<b>Expected Return Time:</b>	<b>7:00 pm</b>
<b>Method of Transportation:</b>	<b>Bus, parent drivers</b>		

**Teacher has considered accommodations for students with special needs, in consultation with the paraeducator and SSS staff, as needed (SSS Documentation Form):**

For insurance liability compliance issues, we cannot accept verbal, telephone, or electronic permission from parents/guardians. **Students without returned forms will not be permitted to attend the activity.** Please review, print, sign, and return this entire form to your child’s teacher/coach no later than **Thursday, January 19th.**

### Consent and Acknowledgment of Risks

I acknowledge the existence of known hazards and the potential for unknown or unforeseeable hazards inherent in leaving school property for field trips, including for the above named event. I understand that there are risks involved in my child’s participation in the event, which may result in any manner of serious or fatal injury or illness. I understand that these risks include, but are not limited to, those related to the following:

Transportation	Bus, parent drivers
Natural Hazards (weather, terrain, etc.)	Road conditions, hill conditions, terrain, weather
Environmental Hazards	
Athletic Injuries	Ski or snowboard related injuries, tubing injuries

Other Hazards

In addition to the above described risks, most trips also include risks associated with theft, vandalism, loss or damage to personal property, risks arising from interactions with others, risks associated with accessing homes, commercial and retail establishments.

I also acknowledge and understand that despite all reasonable precautions, circumstances may arise which are not foreseeable, or which are beyond the control of the school.

### Rules and Regulations

My child has been informed that he or she must comply with the rules and regulations, including directions and instructions from school teachers, instructors and supervisors, as provided to students while participating in the activity.

I agree to counsel my child to follow all instructions given by school staff, to act safely and responsibly at all times, and to follow all safety policies and procedures of the activity.

I agree to supply suitable equipment and clothing for my child's participation in the activity and to take all precautions that the school, in its sole discretion, deems advisable.

### Release, Waiver, and Indemnity

In consideration for the school permitting my child to participate in the activity, I agree that:

- To the best of my knowledge, my child is physically, mentally and emotionally capable of participating in all aspects of the activity. I have provided the school with complete and current medical information and agree that should my child require medical attention beyond that furnished by the activity, I will be responsible for any expenses incurred. I recognize that, if warranted, the school will transport my child to the hospital.
- My choice to permit my child to participate in the activity brings with it the assumption of risk and results which are part of this activity. I also understand and acknowledge that all of the potential risks cannot be listed in this form, and some circumstances may arise that are not foreseeable or are beyond the control of the school.
- I will not commence or participate in any type of claim or lawsuit, will waive any and all claims I may have, and release from all liability the school and its officers, employees, agents, and representatives, for any loss, injury, or damage sustained as a result of my child's participation in the activity.
- I understand, acknowledge and assume all of the potential risks and responsibilities involved in this activity as outlined above in accordance with this permission form. I further acknowledge that I have been informed of my right to obtain as much information about the activity as I feel is necessary.

I hereby give my full, voluntary, and informed consent for my child to participate in the activity.

I understand that by signing below, I am acknowledging the risk of the participation of my child in the activity as described above, and my agreement to the above provisions.

Name of Student: \_\_\_\_\_

Grade: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

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

This Acknowledgement of Field Study/Recreational Activity Information/Acknowledgement/Permission Form is to be completed in full, signed, and dated, before your child will be permitted to participate in the off-site program or activity.

Office Only Principal Initials:

AR



HORSESHOE  
RESORT

**RELEASE OF LIABILITY AGREEMENT, WAIVER OF CLAIMS,  
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT  
BY SIGNING THIS DOCUMENT YOU WILL WAIVE  
CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE  
PLEASE READ CAREFULLY!**

**HORSESHOE RESORT 2022-2023 SCHOOL GROUPS WAIVER**

Name	Last	First		Initial
Address	Street (Inc. Apt #)			
	City		Province	Postal Code
Birthdate	Day	Month	Year	Phone #:
	Parent/Guardian Name (if Participant is under 18)			

TO: HSV Limited Partnership; HSV GP Inc.; Resort Communities LP and any subsidiary, associated, affiliated and controlled companies, and their respective directors, officers, employees, agents, volunteers, independent contractors, representatives, successors, and assigns (the "Ski Area Owners and Operators"), AND TO: the event owners, operators and sponsors, if applicable.

**DEFINITIONS**

- In this agreement, the following terms will have the corresponding meanings:
  - "**Snow Sliding Activities**" shall include but is not limited to Nordic, snowshoeing, tubing, skating, skiing and snowboarding lessons, events, competitive programs, competitions, races and training, arranged, organized, conducted, sponsored or authorized by the EVENT OWNERS AND OPERATORS. "*skiing*" and "*snowboarding*" shall include all types of alpine snow sports permitted by HSV Limited Partnership; HSV GP Inc.; Resort Communities LP.
  - "**Me**", "**Myself**" and "**I**" means the adult being at least 18 years old, accepting these terms on behalf of myself and, if applicable, on behalf of a minor and/or other person; and
  - "**Participant**" means the person actually taking part in the Snow Sliding Activities.

**ACKNOWLEDGEMENT**

- I understand that helmets are intended to help reduce risk of serious head injury, however cannot completely eliminate or prevent this risk. I recognize that helmets do not prevent injury to the wearer's face, neck or spinal cord.
- I warrant and represent that I/Participant is in good health and that there are no special needs associated with the care of Me/Participant that have not been listed on the registration form.
- I understand that as a part of My/Participant's participation in the Snow Sliding Activities, My/Participant's photograph may be taken by a representative HSV Limited Partnership; HSV GP Inc.; Resort Communities LP, or any media that may be present and that My/Participant's photograph may be used in promotional advertising or media coverage of the Snow Sliding Activities. This constitutes authorization to use My/Participant's image for such purposes.

**SIGNING ON BEHALF OF FAMILY MEMBERS**

- I understand and agree that by accepting this Agreement on behalf of a Participant other than Myself, I warrant that I am authorized to execute this Agreement as a parent or legal guardian of the Participant, and/or I have the express authority and permission from the Participant to accept the terms of this Agreement on his or her behalf, and that I am responsible for any claims brought by the Participant, as further set forth herein.

**ASSUMPTION OF RISKS**

- I am aware that participation in the Snow Sliding Activities involves many risks, dangers and hazards including but not limited to: snowboarding, skiing; cuts from skate blades, falling from, or being struck by, lifts while boarding, riding and disembarking; changing weather conditions; exposed rock, earth, ice and other natural objects; trees, tree stumps, tree wells and forest deadfall; the condition of snow or ice on or beneath the surface; changes or variations in the terrain which may create blind spots or areas of reduced visibility; changes or variations in the surface or sub-surface, including changes due to man-made or artificial snow; variable and difficult snow conditions; collision with lift towers, fences other equipment or natural or manmade structures; collision with other skiers, snowboarders, spectators and other event personnel or structures; collision with snowmobiles, snowmaking and snow grooming equipment; slips trips or falls; improper first aid assistance; the failure to ski safely or within one's own ability; falls during lessons, programs or events; falls from use of features in Freestyle or other terrain and maneuvers I may carry out in Freestyle or other terrain; negligence of other skiers and snowboarders, and **NEGLIGENCE ON THE PART OF THE SKI AREA OWNERS AND OPERATORS OR ITS STAFF, INCLUDING THE FAILURE ON THE SKI AREA OWNERS AND OPERATORS OR ITS STAFF TO SAFEGUARD OR PROTECT ME/PARTICIPANT FROM THE RISKS, DANGERS AND HAZARDS OF THE SNOW SLIDING ACTIVITIES.** I am also aware that the risks, dangers and hazards referred to above exist throughout the ski area and many are unmarked.
- I AM AWARE OF THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH THE SNOW SLIDING ACTIVITIES AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF

**PERSONAL INJURY, DEATH, PROPERTY DAMAGE CAUSED BY OR AS A RESULT OF MY/PARTICIPANT'S PARTICIPATION IN THE SNOW SLIDING ACTIVITIES.**

**RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT**

8. In consideration of the HSV Limited Partnership; HSV GP Inc.; Resort Communities LP, EVENT OWNERS AND OPERATORS and the SPONSORS accepting My/Participant's application to participate in Snow Sliding Activities and at all times during the 2018/2019 winter season permitting My/Participant's use of their property, premises, parking and other facilities and for other good and valuable consideration, the receipt and sufficiency of which is acknowledged, I hereby agree:

a) **TO WAIVE ANY AND ALL CLAIMS** that I/Participant have or may in the future have against HSV Limited Partnership; HSV GP Inc.; Resort Communities LP and their respective directors, officers, employees, agents, volunteers, independent contractors, representatives, successors and assigns (collectively hereinafter referred to as the "RELEASEES") and **TO RELEASE THE RELEASEES** from any and all liability for any loss, damage, injury including death, or expense that I/Participant may suffer, or that My/Participant's next of kin may suffer, either directly or indirectly, as a result of My/Participant's participation in Snow Sliding Activities and My/Participant's use of or My/Participant's presence on the facilities, **DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE OWNED UNDER THE OCCUPIERS' LIABILITY ACT, R.S.O. 1990, c.O.2, ON THE PART OF THE RELEASEES, AND INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME/PARTICIPANT FROM THE RISKS, DANGERS, AND HAZARDS OF THE SNOW SLIDING ACTIVITIES.**

- b) TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES for any claims or demands resulting from any property damage or personal injury to any third party, which might be made against the Releasees resulting from My participation in the Snow Sliding Activities and my use of the premises and facilities;
- c) TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any loss, damage, injury or expense caused to or by my minor child, resulting from his or her participation in the Snow Sliding Activities;
- d) That this Agreement shall be effective and binding upon My/Participant's heirs, next of kin, executors, administrators, assigns and representatives, in the event of My/Participant's death or incapacity;
- e) That this Agreement be governed by and interpreted in accordance with the laws of the Province of Ontario;
- f) That any litigation involving the parties to this Agreement shall be brought within the Province of Ontario; and
- g) In entering into the Agreement I am not relying on any oral or written representations or statements made by the Releasees other than what is set forth in the Agreement.

**I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.**

Signed this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

<b>Print Name of Participant or Parent/Guardian's if Participant is under 18 years of age:</b>	<b>Signature of Participant or Parent/Guardian's if Participant is under 18 years of age:</b>
<b>Print Name of Witness:</b>	<b>Signature of Witness:</b>

**THIS AGREEMENT MUST BE COMPLETED IN FULL, INITIALED, DATED, SIGNED AND WITNESSED BY US PRIOR TO PARTICIPATING IN ANY SNOW SLIDING ACTIVITIES.**

Privacy Notice: Horseshoe Valley and HSV Limited Partnership; HSV GP Inc.; Resort Communities LP respect your privacy. Any personal information we collect is used only to develop products, services and offers, communicate with our customers and complete the transactions that ultimately deliver our products and services to you. Your personal information is not shared, without your consent, with third parties for the purpose of marketing or selling their products or services. For more information, please go to [www.horseshoeresort.com/privacy-policy](http://www.horseshoeresort.com/privacy-policy)

HEIGHT	WEIGHT	AGE

# APPENDIX 1b

## SPECIAL WINTER EXCURSION FORM / PARENTAL CONSENT

Participant Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Select Activity:  Skiing  Snowboarding  Cross Country Skiing  Other \_\_\_\_\_  Elective Day

Ability:  Non  Beginner  Intermediate  Advanced Date of Visit: \_\_\_\_\_

<b>Non Skier or Non Snowboarder</b>	First time skiing/snowboarding. Individual has never skied or snowboarded before.
<b>Beginner</b>	The student has skied or snowboarded once or twice or a few times per year and has experienced and maintained control on a number of novice hills of varying difficulty. He/she is able to stop and turn both directions with some success. They are comfortable on green/beginner and some blue/intermediate slopes. May need assistance with getting on or off the lifts.
<b>Intermediate</b>	The student has skied or snowboarded on many occasions and has experienced a variety of hills and different ski areas. He/she can turn and stop under control using recognized formal techniques. They can ski/board with confidence on blue slopes and possibly some black/advanced slopes.
<b>Advanced</b>	The student is an experienced and competent skier or snowboarder. He/she has received formal instruction, knows and understands the Alpine Responsibility Code and can demonstrate ability at an advanced level. Such students can be called upon to assist supervisors.

### IF RENTING EQUIPMENT, PLEASE COMPLETE

DATE OF BIRTH \_\_\_\_\_

HEIGHT cm \_\_\_\_\_

WEIGHT kg \_\_\_\_\_

SHOE SIZE \_\_\_\_\_

Rental Helmet Required Yes  No

*Please include the named participant in the PARK program offered only to Advanced level skiers/ snowboarders. It is suggested that you and your son/daughter view the Smart Style safety video found at: [www.terrainparksafety.org](http://www.terrainparksafety.org). In addition each ski area may have other requirements for entering their terrain park.*

Signature: Parent / Guardian \_\_\_\_\_

### RENTAL EQUIPMENT

Bindings on equipment reduce the risk of injury when falling. They will not release under all circumstances and they do not guarantee safety in all cases. Parents must accept responsibility for equipment that is lost or damaged (other than reasonable wear and tear).

### ALPINE / CROSS COUNTRY RESPONSIBILITY CODE

The Ontario Snow Resorts Association has produced an Alpine/Cross Country Responsibility Code which the named ski area \_\_\_\_\_ and the named school board \_\_\_\_\_ requires that you know and obey. Skiers/snowboarders must always ski/snowboard in control and be able to stop and change direction to avoid collisions with people or objects. The named ski area \_\_\_\_\_ may revoke a lift ticket for violation of the code or other unacceptable conduct.

**All participants must wear an appropriate snow sport helmet for school excursions to OSRA member facilities.**

**We recommend that schools adopt a mandatory snow sport helmet policy regardless of ski facility locations.**

### ACKNOWLEDGEMENT / INFORMED CONSENT

This signed form is required for all students who wish to participate in this outdoor recreation and snow sport education program. It should be understood that the purpose of this excursion is educational. Lessons are mandatory.

#### INHERENT RISK

Skiing/Snowboarding/other is a sport with physical demands and inherent risks which are beyond the control

of \_\_\_\_\_ and \_\_\_\_\_  
(Name of School Board) (Name of Ski Area)

The inherent risks include, but are not limited to: falling; use of lifts; collision with natural or man-made objects or other persons; changing weather conditions; changes or variations in the terrain or surface; exposed rocks, earth or ice; travel beyond the trail boundaries. Incidents may occur which result in serious injury or death. Participants **must assume** the inherent risks of the sport.

It is strongly recommended by the Ontario Snow Resorts Association that you visit their website: [www.skiontario.ca](http://www.skiontario.ca) to review the complete skiing in schools and safety information on this site prior to your school visit. Following all rules and procedures can reduce the risk of injury. Failure to follow the rules will result in the student losing their lift ticket and future resort privileges.

**We have read and understood the above information, and agree to the regulations as outlined by the Ontario Snow Resort member Ski Area. I give my son/daughter permission to participate in the above noted activity at the ski area indicated.**

Parent / Guardian Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_