



White Water Rafting

You are invited to join St. Ambrose and others for two incredible days of team building, fun, and adventure on the Lower Yough River in Ohio, PA!!

Date: Monday, July 13th through Tuesday, July 14th

Time: Depart from St. Ambrose [929 Pearl Road, Brunswick] on Monday at 9:30 AM and return to St. Ambrose on Tuesday around 11:00 pm

Cost: \$70 [This includes: transportation, camping, rafting, dinner on Monday, breakfast and lunch on Tuesday]

Please return the bottom section of this form, your cash or check (payable to *St. Ambrose*) and the signed release form to Mike Horvath in the Parish Office. For questions call 440.829.3363 or mhorvath@StAmbrose.us **Permission slips due on Sunday, June 14, 2009.**

What to bring:

- Tent [if you have one]
- Sleeping bag
- Clothing [including: swimming suit, and shoes that can get wet...no sandals on the river!]
- Sun screen and insect repellent
- Flashlight
- Necessary medications
- Toiletries
- Appropriate music and DVDs for the bus
- Snacks for the bus and camp
- \$10 for food on the return trip

Name: _____ Age _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____

Email _____

Please circle one: I have a tent: Yes / No

Please return this form to Mike Horvath in the Parish Office.
Teens under the age of 18 will need to have a safety waiver signed by a parent or guardian.

White Water Rafting Trip Permission Slip (Under 18 Years Old)

I, _____, am the _____ of _____
Adult Name Relationship Participant

who is participating in the White Water Rafting on July 13-14, 2009 on the Lower Yough River in Ohio, PA. This includes a bus trip and overnight camping. I hereby consent to participation in this activity. In the event of an emergency during this activity, please contact:

_____ at (phone) _____.

Therefore, by my signature, I agree to release, absolve, and hold harmless Saint Ambrose Parish, and all supervisors, employees, organizers, support or volunteers associated with the program, the Bishops of Cleveland, and the Roman Catholic Diocese of Cleveland from any and all claims, debts, judgments, and liability for any injury, medical fees, hospital bills or doctor bills of the above-named incurred as a result of participation in this activity.

Parent (Guardian) Signature

Dated: _____

Wilderness Voyageurs, Inc.

P.O. Box 97

Ohioypyle, PA 15470

PARENT/GUARDIAN PERMISSION FORM

(This form is to be used for minors only)

I hereby grant permission for my child _____ to participate in Whitewater Rafting, Boating Instruction, Mountain Biking, Rock Climbing/Repelling and related wilderness travel at Wilderness Voyageurs, Inc. on (date) _____ and I hereby agree as follows: I fully understand and acknowledge that: (a) risks and dangers exist in my child's use Whitewater Rafting, Boating Instruction, Mountain Biking, Rock Climbing/Repelling and related wilderness travel equipment and my child's participation in Whitewater Rafting, Boating Instruction, Mountain Biking, Rock Climbing/Repelling and related wilderness travel activities. (b) my child's participation in such activities and/or use of such equipment may result in injury or illness or death or damage to personal property, (c) these risks and dangers may be caused by other participants, or by accidents, or by the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, weather conditions, risks of falling out of a raft, kayak, or canoe, and such other risks, hazards and danger that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment, and (d) I hereby accept and assume these risks and dangers.

I have been advised that my child must wear an approved personal floatation device at all times while on the water. I affirm that my child will not be under the influence of alcohol or controlled substance, and will not carry, use, or consume these substances before or during her/his scheduled activities. Any claims or dispute arising from my child's participation in Wilderness Voyageurs' activities or use of Wilderness Voyageurs' equipment shall be venued in the Fayette County Supreme Court of the Commonwealth of Pennsylvania.

My child is in good health and is at or above the minimum age stated in Wilderness Voyageurs' advertising for each activity in which he/she will participate. I understand that strenuous physical exertion may be required and my child has no known physical disabilities or health problems which will present any risk to his/her participation in the activities.

I permit the use of any photos, slides, films, or sketches of him/her taken during the day's activities for publicity, advertising, promotion, or other commercial purpose. The above agreement shall be binding on my heirs, successors, assigns, administrators, and executors.

I HAVE READ THE ABOVE AND BY SIGNING IT AGREE. IT IS MY INTENTION TO GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN WILDERNESS VOYAGEURS' WHITEWATER RAFTING, BOATING INSTRUCTION, MOUNTAIN BIKING, ROCK CLIMBING/REPELLING AND RELATED WILDERNESS TRAVEL AT WILDERNESS VOYAGEURS, INC, AND TO ASSUME AND ACCEPT ALL RISKS ASSOCIATED THERE WITH.

Mother's Name: (Print) _____ Signature: _____

Father's Name: (Print) _____ Signature: _____

Street and Apt. Address: _____

City: _____ State: _____ Zip: _____

Child's Name: _____ Age: _____ Trip Date: _____

Child's Signature **(REQUIRED)**: _____

Signature of Parent or Guardian **(REQUIRED)** _____