

SKI TRIP SIGN UP FORM

- **What's included in the weekend?**
 - Lift tickets for 2 full days of skiing and snowboarding (for all levels)
 - Two nights lodging at beautiful condos
 - Round Trip bus transportation
 - All included food (Friday night dinner, Saturday 3 meals, Sunday 2 meals)
 - Awesome teen programming
 - Energetic Shabbat and *Havdallah* services, led by Teen's.
 - Movies, Music, Laughs, Games and much, much more!!!
 - 20% off Ski Rentals at Ski Shop Santa Cruz(We recommend bringing equipment from home, so that there is more time on the slopes and less time in lines!)
 - Responsible Adult Chaperones.

- **Timing**
 - **Leave Friday February 26 at 1:30 p.m.**
 - **Return Sunday Night February 28 at 9 p.m.**

- **Who can go on this trip**
 - Any 9th thru 12th graders that are members of SRFY. This trip is likely to fill up and registration will be first come, first served.
How do I sign up?
 - Simply return the completed sign-up form, youth group membership/ code of conduct form and deposit of \$100 Temple Beth El
3055 Porter Gulch Rd., Aptos Ca, 95003

Participant's Name: _____
 Parents Phone #: _____ Parent Cell #: _____
 Email address: _____
 Emergency contact (other than parent): _____
 Emergency Phone: _____ Emergency. Cell: _____

- Please indicate any medical concerns that might affect your child's trip (i.e. allergies, diabetes, etc.)

- Please indicate your child's physician and any medication (including allergy medication) that the student will bring with him or her.

Physician's Name: _____ Phone #: _____

Insurance Company: _____ Policy #: _____

Medications: _____

I give my permission for _____ to attend the **SRFY Ski Trip**. The parents and child understand that skiing has inherent risks and that snow conditions are unpredictable. I release the ski hill owners, teachers or other accompanying adults, and Congregation Temple Beth El from any sporting injuries that may occur. I give permission to the staff to authorize medical personnel to render emergency treatment to my child if such personnel deem it necessary.

Signature of Parent: _____

Name of Parent: _____ Date: _____

COST:	
Early Bird Registration Fee (by February 11th)	\$300.00
Regular Registration (February 12th – 23rd)	\$350.00

A \$100 non-refundable deposit must be received by Rabbi Shifra to hold your spot.

Please make all checks payable to Temple Beth El

For more info, contact Rabbi Shifra at (831)479-3444 ex. 217 or email swp@tbeaptos.org