

## Grad 2026 Mt. Washington Ski Trip



(January 16, 2026) (Forms & Waivers due January 9)

First Name:	Last	t Name:		
On <u>January 16</u> , 2026, Royal Bay Se	condary's Grad Lea	dership class is org	janizing a Ski	Trip to Mt. Washington
<ul> <li>There are <u>4 different</u> options available than the</li> </ul>	• •	h person's interes	ts or needs.	There are no other
<ul> <li>NEW THIS YEAR: Everyone offered that cater to ALL le Everyone will learn someth</li> </ul>	evels of skiers or b ning new!	oarders, be it first	-timers to lo	ng-term experts.
<ul> <li>Please CHECK THE BOX of documents and waivers fo</li> <li>A form and waiver MUST to</li> </ul>	r the option you h	ave selected.	•	
<ul> <li>A form and waiver MUST t</li> <li>A parent info night will be</li> <li>Forms are due January 9th</li> </ul>	on Monday, Janua	ary 12, 2026 at 7p	•	r Casif Off-Iffle).
Option # 1: SKI/BOARD - FUI	LL PACKAGE	– Cost: \$170	Ski	Board
<u>Includes</u> : Lift ticket, le <b>MUST</b> complete waiv		•		
Option # 2: SKI/BOARD – Wi	thout Rentals	– Cost: \$140	Ski	Board
<u>Includes</u> : Lift ticket, le <b>MUST</b> complete waiv	•			
Option # 3: Tubing Ticket (1-	2 hour pass) & Bus	Ride – Cost: \$95		
<u>Includes</u> : Tubing ticke <b>MUST</b> complete waiv	•			
Option # 4: Luxury Bus Ride	Only	– Cost: \$75		
<u>Includes</u> : A luxury bus <b>MUST</b> complete waiv				
The following emergency contact in	formation <u>MUST</u> b	e completed:		
Emergency Contact Name:				
Emergency Contact Phone #:		Parent E-n	nail:	

<b>FINDING YOUR SKI/BOA</b>	ARDING LEVEL:	
Choose one of the follow	ving ability levels from	below:
Level 1 Skier or Boarder - F	irst Time/Beginner Skier/Sno	wboarder
• This is introductory	level with a person who has n	ever skied/ridden OR only done so up to four times.
They will learn to na	vigate gentle, smooth green s	slopes with cautious skiing/riding techniques.
The lesson takes pla	ce in the Easy Acres Area.	
Level 2 Skier or Boarder - E	Beginner and Intermediate Sk	ier/Snowboarder
Students can confident	ently link turns on all Green ru	uns,
<ul> <li>has skied/Snowboar</li> </ul>	ded 5+ times and is able to ca	autiously navigate on Intermediate (Blue) terrain.
<ul> <li>Lessons typically taken</li> </ul>	ce place in the Hawk Chair terr	rain.
Level 3 - Skier/Snowboard	<u>er</u> - Intermediate and Advanc	ed Skier/Snowboarder
Student can confide	ntly ski/ride on Blue terrain at	t moderate to fast speeds up to an aggressive
skier/rider that may	venture onto Black runs.	
<ul> <li>Suitable areas are H</li> </ul>	awk, Whiskey Jack, Eagle and	Sunrise terrain.
RENTALS FORM Please complete all the Complete for Skiing Only:	information needed be	elow: (i.e. height, weight, age)
First Name:	Last Name:	
Weight (lbs):	Height (feet):	Age:
Gender:	Shoe Size:	
Complete for Snowboarding On	ıly:	
First Name:	Last Name:	
Weight (lbs):	Height (feet):	Age:
Gender:	Shoe Size:	

## SCHOOL CONSENT FORM FOR CHILD PARTICIPATING IN MODERATE RISK ACTIVITY

Date: November 25, 2025 Dear: Parents, In consideration of School District No. 62 (Sooke) offering my child opportunity to participate in a field trip for Grade 12 students for the annual Grad fieldtrip to Mt Washington Alpine Resort on 01/16/26, I waive any and all claims I may have against, and release from all liability and agree not to sue the Board of School Trustees of School District No. 62 (Sooke) and its officers, employees, agents, volunteers and representatives, and the Ministry of Education for any personal injury, death, property damage or loss sustained as a result of my child's participation in the field trip. I hereby give my consent and acknowledge by my signature that: Initial Students will be going to Mt Washington Alpine Resort and will be away from the school from 5:45am **7:00pm**. They will be travelling by bus with **Wilson Transportation**. Initial On this field trip, up to 100 students will be: Skiing, Snow Boarding or Tubing on Mt. Washington Initial The students will be supervised by **7 RBSS school staff members**. Please Note: "Your child will not necessarily be supervised by an adult at all times." Initial My child has no illnesses, allergies or disabilities that may require special attention, except as described here: Initial I am aware of the usual risks and dangers inherent in participation in all of the activities associated with this trip and of the possibility of personal injury, death, property damage or loss resulting from Initial the activities. The dangers and risks may include, but are not limited to: Unorthodox or high risk travel arrangements. Program locations. Rugged terrain. Rock fall and avalanches. Weather. Equipment breakage, failures. Delayed rescue, accessibility. Conduct of the guide, chaperone or other group members. The possibility that your child may not heed safety instructions or restrictions given to the group. I acknowledge that if the Superintendent of Schools deems the trip unsafe, he or she can recall students back at any time. **Initial** I will supply suitable equipment and clothing for my child's participation in all activities associated with the field trip, including: Initial I am aware that I should contact the school for further information if I am unaware what clothing and equipment is required for the activities or possible weather conditions of this field trip. My Initial child and I understand that it is our responsibility to ensure my child has all necessary equipment

and clothing.

My child and I understand that the school's Code of Conduct a responsible for any costs caused by my child's failure to abide any costs to send my child home.	••	Initial
Accidents can be the result of the nature of the activity and can either part of the student, or the School Board or its employenere the activity is taking place. By allowing your son/daugly you are accepting the risk of an accident occurring, and agree is suitable for your child.	oyees or agents, or the facility hter to participate in this activity,	Initial
In signing this consent and Waiver, I am not relying on any or ments made by the School Board and its servants, agents, em the Ministry of Education, to induce me to permit my child to out in this Consent and Waiver.	ployees, or authorized volunteers, or	Initial
I am 19 years of age or more and have read and understand the terms of this Consent and Waiver and understand that it is binding upon me, my heirs, executors and administrators. executors and administrators.		
5 , , ,	's and administrators.	Initial
5 , , ,	s and administrators.	Initial
executors and administrators.	Signature of Parent/Guardian	Initial
executors and administrators.  Date:		Initial 

NOTE: This Consent and Waiver must be signed by ALL custodial parents or guardians of a child who is under the age of 19 years.