

# 2006 – 2007 MERCK SKI ASSOCIATION MINOR'S TRAVEL / ACTIVITY PERMIT

We are pleased that you will be bringing a child on one of our trips or club activities. Merck Ski Association, hereafter also referred to as MSA, requires that the parent and/or legal guardian of any person under the age of eighteen, traveling with an adult other than their own parent and/or guardian, complete and notarize the Minor's Travel/Activity Permit, herein called "Permit". A separate permit must be completed, signed and notarized for each minor.

Note that there must be a designated guardian in order for the minor to participate in club activities or trips, except those specifically excluded from this requirement by the MSA executive board. The child's parent and/or legal guardian must fill in the name of the designated guardian for the duration of the activity or trip and parent/legal guardian's signature must be notarized prior to returning this form to the Trip/Activity Leader. You should make an extra copy of the form for the child to carry at all times while on a trip/activity. Return the completed form to the Trip/Activity Leader.

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I, \_\_\_\_\_, parent and/or legal guardian of \_\_\_\_\_, agree that the MSA shall not be, or become liable or responsible in any way whatsoever in connection with loss, injury or damage suffered by said minor(s) or myself, howsoever caused or arising in any connection with the Merck Ski Association's trip/activity \_\_\_\_\_, on \_\_\_\_\_, 20\_\_\_\_.

I further designate \_\_\_\_\_ as the minor's guardian for this trip and authorize said guardian to grant permission for any emergency medical care, by recognized medical personnel, needed as the result of any accident, injuries or illness suffered during the course of the MSA trip/activity.

I have fully read this release and understand its contents. I realize that I am agreeing to hold MSA harmless for any action that occurs while my child is participating in this MSA sponsored function. I have had the opportunity to take this document to a lawyer and have it examined and explained to me prior to executing it.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_:

SS

COUNTY \_\_\_\_\_:

Be it remembered that on this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, personally came before me,

\_\_\_\_\_, known to me personally to be such, and

acknowledged this instrument to be their act and deed.

Given under my hand and seal of office the day and year aforesaid.

\_\_\_\_\_  
Notary Signature