



Valley Fair Older Member Trip

On **July 26th** we are planning an older member trip to Valley Fair. This trip is open to anyone in grades 7-13th. We will leave from River Falls High School, Lower Level Parking Lot at 9:00 a.m. Please check in no later than 8:45 am. We will stop in Prescott, Tractor Supply at 9:15 to pick up any members wanting to get on in Prescott and arrive at Valley Fair around 10:30 am. We will leave the park at 5:30 pm. arriving back to Prescott at 6:30 p.m. and back to River Falls around 6:45pm. You will need to turn in the **permission** slip in by **July 18th** to the extension office. **It is \$38 for 4-Hers & \$43 for your non-4-H friends.** Includes round trip transportation and admission ticket. Minimum amount of participants required. We will need 2-3 chaperones (depending on the amount of members that go). We will take the first that come in to go as paid chaperones (must be youth protection certified and signed up as a leader through the 4-H online system). After we have enough chaperones, parents are welcome to come as paid guests. Don't miss out on this fun day!! Includes Water Park so bring your suit and towel!

Name _____ Grade _____ Participants cell number _____

Email please print _____

Please bring a lunch with you. We will meet for lunch outside the park at a certain time. Coolers will be provided on the bus if you need to keep your lunch cold. You may want to bring extra cash if you want to purchase additional treats or visit the Dinosaurs Alive exhibit. The park rides and Water Park ARE all included in your admission.

4-H Member (\$38): _____

Friend of a 4-Her (\$43): _____

Medical Condition/Important Information- Include any allergies (food or other): If none please write none

Emergency Contact Name: _____ Phone: _____

I believe that my child is in good health, and I do hereby permit my child to participate in all activities of the 4-H event, unless otherwise noted. I do not hold the Extension agents or their representatives, the University of Wisconsin Extension, the State of Wisconsin, Pierce County 4-H Adult advisors, Inc., or Pierce County responsible for accidents arising from this program. Furthermore, if emergency treatment is required during this activity and the parents/guardians cannot be reached, I grant permission for emergency medical treatment from a hospital or medical person.

Signature of Parent (Guardian): _____ Date _____

Parent phone number _____

Checks payable to: Pierce County 4-H and send to: UW Extension Office, PO Box 69, Ellsworth WI 54011
Make a separate form for each person going.

Due July 18th

Parent Helpers - ____ Yes, I would like to go to Valley Fair as a Chaperone: Yes ____ I am an active leader through Pierce County 4-H and have been youth protected/screened through the system.

If not a chaperone, I would still like to go as a guest for \$38 ____

Parent Name _____ Cell phone # _____

Email please print _____