



Therapeutic Recreation Services  
808 W. Spokane Falls Blvd  
Spokane, Washington 99201-3317

**PRSRST STD**  
U.S. Postage  
**PAID**  
Spokane, WA  
Permit No. 722



Check out our website  
**spokaneparks.org**



# DOWNHILL SKIING & SNOWBOARDING

**2010 Season**

For Children and Adults  
8 yrs & older with  
Developmental Disabilities



## Volunteers Needed

On snow training clinics are  
January 9-10, 2010, 9:00 a.m.- 4 p.m.  
at Mount Spokane, Lodge 1.  
Please call 625-6245 or email at  
abusch@spokanecity.org for registration form  
and additional information.



## Spokane Park and Recreation Department

# 2010 SEASON



*In Cooperation With Mt. Spokane Ski & Snowboard Area*

### The Program

The Therapeutic Recreation Ski Program is now in its 38<sup>th</sup> year of operation. We utilize volunteers from the community and local universities/colleges in order to achieve a one-to-one instructor/student ratio for new skiers/snowboarders and at least one- to three for experienced skiers. This allows for improved safety and skill development in a mainstreamed environment. We hope you will share our admiration and support of the Mt. Spokane Ski & Snowboard Resort and Ski School which have been instrumental to the success of this program. We are also appreciative of Washington Special Olympics who sponsor the Chapter Winter Games in Wenatchee.

### Calendar

**Ski Season:** Saturday January 16 through February 27 \*No skiing on Feb. 13 (see Ski Days information)  
**March 5-7:** Chapter Winter Games Mission Ridge, Wenatchee

### Fees

11654	\$143.00	Lessons Only
11655	\$213.00	Lift ticket and lessons only - No bus transportation.
11656	\$283.00	Lift ticket, lessons, and bus transportation.
11657	\$283.00	Lift ticket, lessons, and equipment rental. (No bus transportation).
11658	\$380.00	Lift ticket, lessons, equipment rental and bus transportation

Fees do not include optional Special Olympic fees for transportation costs to the Chapter meet.

### Scholarships

A limited amount of scholarship money is available for individuals needing assistance. We request that individuals pay as much as they can afford so that we may assist more skiers. Call 625-6245 to request an application.

### Transportation

#### Careproviders/Parents/Students:

Please be aware that if the roads are clear the bus may arrive back as much as fifteen minutes early and if road conditions make for slow travel, the bus could be a few minutes late. Please be at the sites in plenty of time to take your skier home. One late pick-up can cause delays for the rest of the group. We may assess late fees if necessary. All late pickups will be taken to Sinto Senior Center. Be sure to mark on your registration form which site you will be using. We encourage not using paratransit for this program but if you do please use only Sinto as transportation site.

If you are not taking our transportation, please meet at Lodge #1 at 10:30 a.m.. Practice will be done at 3 p.m.

#### The bus will leave:

Sinto Sr. Ctr.	1124 W. Sinto	9:00 am
Zip Trip	Monroe & Wellesley	9:15 am
	Lincoln Rd & Division	9:30 am

#### The bus will return:

	Lincoln Rd & Division	4:30 pm
Zip Trip	Monroe & Wellesley	4:45 pm
Sinto Sr. Ctr.	1124 W. Sinto	5:00 pm

### Recreational Skiing

For those people who are not interested in competing in Special Olympics, we will assign a ski buddy to provide support and instruction as desired. The emphasis will be on safety and fun rather than running the gates and competing.

### Competition

#### Washington Chapter Special Olympic Winter Games Wenatchee, WA

#### March 5-7, 2010

For students who are interested in competition and have met the requirements of TRS please read the following. Must have a Special Olympics Application for Participation Form on file with TRS by **January 4, 2010**. Special Olympics will cover competition costs, hotel, partial transportation and all but two meals.

We strongly encourage you to make a donation of \$25 minimum to Special Olympics to help cover some of the competition, transportation and hotel costs, please send to: Special Olympics Washington, East Region, P.O. Box 1640 Richland, WA 99352.

Bring \$40.00 on the trip to cover two meals and souvenir.

### Team Jackets

We ordered new team jackets last spring and they are finally here. We have used Breakfast Benefits funds plus donations and a grant from the Employee Recycling Program out of Seattle to offset the costs. The cost to participants is \$70.00. Please make check payable to Spokane Parks Foundation.

## Meals

Skiing/snowboarding can be very physical and we burn up a lot of energy, especially on those cold nights. Our concern is when a student brings a light lunch/supper and no drink(fluid). Please pack a nutritious and filling lunch. Please be sure to notify us of food allergies.

The ski hill does offer a restaurant for regular purchases such as chili, hamburgers, yogurt, fries, coke, coffee and hot chocolate. The prices are somewhat inflated, so if sending money, please send enough. Some of the skiers purchase a meal, others buy pop or coffee, while others bring their entire meal (sack-lunch). The instructors will help/assist each student as necessary. We will not give money for lunches.

## Clothing

**LAYERING** is the best way to dress for skiing, and the concept is very simple. Articles of clothing are combined to form various strata of insulation around the body. It begins with the layers closest to the body, which trap heat and wicks away perspiration. Next comes the intermediate layers. Their job is to maintain a warm layer of trapped air. Finally, the exterior garment forms a protective membrane. This keeps wind, cold air, and water from cooling the warmth-building inner layers. The beauty of this approach to dressing is that you can add or subtract various layers to maintain the desired inner temperature.

### First Layer

- **LONG UNDERWEAR**—(top and bottom) these should be polypropylene as this type of material wicks off moisture caused by perspiration. Capilene, REI brand etc. are also a desirable material. It comes in different weights of which expedition is probably the best for the downhill skiing that we do, and it does not retain odors. This material is more costly than polypropylene, but well worth the investment if you can afford it.
- **SOCKS** – polypropylene—for same reason as above. Avoid cotton next to the skin. Avoid too many or too thick of socks as there could be bunching that leads to blisters.

### Second layer

- **FLEECE PANTS** – for use in very cold weather.
- **MICROFLEECE OR LIGHT-WEIGHT FLEECE TOP OR VEST** – to provide an insulating and breathing layer. Make sure the top allows for freedom of movement.
- **JACKETS, SHELLS OR BIBS** are filled with either the traditional goose down or some synthetic insulating material. They are usually covered by some sort of nylon blend or by a water-resistant fabric like Gore-Tex. You may also invest in a silicone spray or Camp-Dry to spray materials helping them to be more water resistant.

The final things you'll need for a complete set of ski clothing are Hand protection, goggles or sunglasses and a hat.

- **MITTENS OR GLOVES** – Keeping your hands warm is best done with mittens, but gloves allow you to feel the poles much better. For the real cold days, a liner can be worn inside your gloves. It is also best to have an extra pair of gloves in case your gloves get wet.
- **SKI HAT** – A ski hat is essential. You can lose almost 50% of your body heat through your head, and not wearing a hat on cold days is an invitation to illness.
- **GOGGLES OR SUNGLASSES** – Goggles or sunglasses can help protect a portion of your face from the wind, as well as filter out the harmful rays of the sun.
- **DUFFEL BAG** – Each student should have a large duffel bag to carry his/her extra clothing and lunches. PLEASE wear or bring an extra pair of winter boots to change into for the bus ride home. Remember to label all clothes, ski-equipment and bags!
- **HELMETS** – We strongly encourage skiers to wear ski helmets. If competing in Special Olympics the skier must wear a helmet. If unable to purchase one, we do have several in our loan program.

\*Spokane Parks and Recreation is not responsible for lost equipment or clothing. Please mark equipment.

### **\*\*ONE DAY SKI TRIPS\***

## **SILVER MOUNTAIN & 49° NORTH SKI DAYS**

Skiing for people with developmental disabilities who ski independently, stay with a group, follow directions, and get along with others. There will be two/three staff and up to twelve participants. This is purely recreational skiing. Sinto Senior Activity Center, 1124 W. Sinto. Fee includes transportation, staff, & lift ticket. \$49 per ski day.

**11759 Sun February 21 Silver Mt.**  
Leave 7:30 am - Return 5:30 pm

**11760 Sun March 14 49° North**  
Leave 7:30 am - Return 4:30 pm

# Therapeutic Recreation Services

Fifth Floor - City Hall 808 W. Spokane Falls Boulevard, Spokane, Washington 99201-3317

This is confidential information used only to assist the staff in meeting the participant's needs. This form must be filled out, signed, and returned with the fee to the above address before January 4, 2010.

PARTICIPANT'S NAME: \_\_\_\_\_

HOME#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHYSICIAN NAME: \_\_\_\_\_ PHONE#: \_\_\_\_\_

EMERGENCY CONTACT & #: \_\_\_\_\_

Do you have an Instructor Preference? Yes \_\_\_ No \_\_\_ Male \_\_\_ Female \_\_\_

Allergies: \_\_\_\_\_ Other health conditions: \_\_\_\_\_

Any seizures within the last year? YES \_\_\_ (Date) \_\_\_ NO \_\_\_ Grand Mal \_\_\_ Petite Mal \_\_\_ Other: \_\_\_\_\_

Medications taken during program? YES \_\_\_ NO \_\_\_ If yes, please fill out a medication waiver and information form.

Medications (dosage, frequency, side effects, reason) \_\_\_\_\_

Assistance in using the bathroom? YES \_\_\_ NO \_\_\_ Describe Mobility \_\_\_\_\_

Explain communication skills: \_\_\_\_\_

Behavioral or other issues Therapeutic Recreation needs to know about participant: \_\_\_\_\_

Do you use paratransit services? Yes \_\_\_ No \_\_\_ What is # \_\_\_\_\_ Be sure to use Sinto as your bus stop.

## REGISTRATION INFORMATION (Check appropriate classes & transportation site needed)

- \_\_\_ A. 11654 **\$143.00** - Lessons only
- \_\_\_ B. 11655 **\$213.00** - Lift ticket and lessons (No bus transportation).
- \_\_\_ C. 11656 **\$283.00** - Lift ticket, lessons, and bus transportation.
- \_\_\_ D. 11657 **\$283.00** - Lift ticket, lessons, and equipment rental (No bus transportation).
- \_\_\_ E. 11658 **\$380.00** - Lift ticket, lessons, equipment rental, and bus transportation.
- \_\_\_ F. 11759 **\$49** - Silver Mountain 2/21/10
- \_\_\_ G. 11760 **\$49** - 49° North: 3/14/10

Skier  Snowboarder

Height: Feet \_\_\_ Inches \_\_\_ Weight \_\_\_ Shoe Size \_\_\_ Birthdate \_\_\_ Sex: M \_\_\_ F \_\_\_

Have you participated in the Ski Program before? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

**SPECIAL OLYMPICS OPTION - DO YOU WISH TO PARTICIPATE IN THE WINTER SPECIAL OLYMPICS?** Yes \_\_\_ No \_\_\_

If yes, each participant must have: (1) A current physical; (2) Be ready to pay transportation costs to the Chapter Meet

**METHOD OF PAYMENT:** (Check and fill in appropriate lines)

Check  Cash  Money Order  VISA  MC Card # \_\_\_\_\_ Exp.: \_\_\_\_\_

Name on Card \_\_\_\_\_ Total Program Fee: \$ \_\_\_\_\_ Donation \$ (if any): \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED: \$ \_\_\_\_\_ Please return this form with fees, and completed physical if needed, by JANUARY 4, 2010! \*\*\* Accident Waiver must be signed before registration is accepted \*\*\***

Return completed registration form and signed Accident Waiver/Release and check made payable to "Spokane Parks & Recreation".

## ACCIDENT WAIVER/RELEASE OF LIABILITY AND ACKNOWLEDGEMENT OF RISK

I know that skiing is a hazardous activity. I will not participate unless I am medically able and properly trained. I have read and understood the information provided by the City that explained the program, including the training of participants, the eligibility and safety rules, any equipment to be used, and the emergency medical plan. I have had all of my questions adequately answered by City staff. I assume all risks associated with skiing, including but not limited to those caused by terrain, facilities, temperature, weather, condition of my or the City's equipment, vehicular traffic, actions of other people including participants, volunteers, spectators, coaches, and City staff, all such risks being known and appreciated by me.

PHOTO RELEASE: I give my permission to have my photo taken during activities and understand that such photos may be used for publicity purposes.

I will accept the alpine/adaptive equipment for use, as is. I agree to be fully responsible for the equipment while it is in my possession and to return it by the agreed time/date. I agree that I may incur additional charges if the equipment is returned late, dirty, or damaged beyond normal wear and tear. I accept my responsibility to replace, at full retail value, any alpine/adaptive equipment which I fail to return.

I accept the risks involved in the use of alpine/adaptive equipment, including but not limited to, skis, snowboards, boots, poles, sit-skis, mono-skis, bi-skis, outriggers, slant boards, ski stabilizers, edgie-wedgies, walkers, harnesses, helmets, and any other equipment that I may use.

I, for myself, and for anyone entitled to act on my behalf, (A) **WAIVE, RELEASE, AND DISCHARGE** the City of Spokane, Mount Spokane, Inc., and their officers, employees, volunteers, representatives, and agents from any and all liability for my death, disability, personal injury, property damage or damage or loss to me during participation in alpine/adaptive skiing and traveling to and from this event;

(B) **INDEMNIFY AND HOLD HARMLESS** the City and Mount Spokane, Inc., and all persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions while participating, except for those claims arising from the sole negligence or sole willful conduct of the City, its officers, employees, or other representatives.

I HEREBY CONSENT to receive medical treatment which may be deemed advisable if I am injured or become ill while participating in alpine/adaptive skiing.

I HEREBY CERTIFY that I have read this document and I understand its content.

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## PARENT/GUARDIAN WAIVER FOR MINORS

I, \_\_\_\_\_, am the parent or legal guardian of the participant \_\_\_\_\_ and acknowledge that I have read this AWRL and understand its content.

I HEREBY AGREE TO **WAIVE, RELEASE, AND DISCHARGE FROM LIABILITY** and promise to **INDEMNIFY AND HOLD HARMLESS** the same entities and by law, I am waiving my child's rights.

PARENT/GUARDIAN: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_