

# Dakotah!

SPORT AND FITNESS

2100 Trail of Dreams, Prior Lake, MN 55372  
952-445-9400 952-445-6117 fax

## 2008 DAKOTAH! LOCK-IN

**FRIDAY DECEMBER 5**  
**10:00PM – 5:00AM**

Registration begins at 9:45pm at Christ the King Lutheran Church.  
When you arrive, find your youth leader to check in.  
Get picked up at 5am at CtK:

Christ the King Lutheran Church  
8600 Fremont Avenue S  
Bloomington, MN 55420  
952-881-8600

## OPEN TO YOUTH IN GRADES 6-9

**Bring all your belongings in a bag LABELED with your name and contact information**

**Some things you might bring along include:**

- Ice skates (or \$2.50 to rent)
- Swimming suit and towel (modesty, please!)
- Hockey gear (this year helmets are REQUIRED for hockey)
- Comfy clothes for lounging
- Money for snacks at the concession stand

**Your belongings are your responsibility at the event.**

**Please leave your cell phones at home.**

**COST: \$ 30.00**

(includes transportation to and from Dakotah!, ice skating, racquetball, volleyball, basketball, swimming and waterslides, rock climbing, pizza and pop)

### **REGISTER BY NOVEMBER 19:**

Return the enclosed form

Front side: permission and release for the event

Back side: rock wall release form (must be signed to climb)

**Along with \$30.00** (payable to "NHUMC")

Find out more about the youth element in Bloomington or get these forms online at:

<http://theyouthelement.org>

# Dakotah!

SPORT AND FITNESS

2100 Trail of Dreams, Prior Lake, MN 55372

952-445-9400 952-445-6117 fax

## 2008 Dakotah! Lock-in

### Registration/permission form

Please return this form, the rock wall release on the opposite side, and \$30 by  
**November 19** to your church youth worker

Name \_\_\_\_\_

Grade \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

My child, \_\_\_\_\_, has my permission to attend the 2008 Dakotah! Lock-in event, sponsored by the Bloomington Youth Workers. I understand that this includes permission for my child to be transported by bus, or in the vehicle of an insured, licensed, adult driver over the age of 19 to and from the Dakotah! facility. I understand that the activities involved in this event are physical in nature, and do not hold Bloomington Youth Workers, Dakotah! Sport and Fitness, or their representatives accountable for any accidental injury that my child might experience.

In the event of an emergency or non-emergency situation in which medical treatment is required, every reasonable effort will be made to contact the persons listed. If unsuccessful in contacting the persons listed, consent/permission is given for treatment by competent medical personnel. Further, and unless specified otherwise, consent is given to all accompanying adult volunteer leaders associated with this group to secure proper treatment for my child. I, the undersigned, authorize the administration of emergency medical treatment for my child. I understand that all reasonable safety precautions will be taken at all times by Bloomington Youth Workers and its agents.

**I also understand that my child is asked not to bring a cell phone to this event. I will be provided contact information for the adult leaders who will be present, or can call the Dakotah! facility in the event of an emergency.**

Signature of Parent

Or Legal Guardian \_\_\_\_\_

Date \_\_\_\_\_

# Dakotah!

SPORT AND FITNESS

2100 Trail of Dreams, Prior Lake, MN 55372

952-445-9400 952-445-6117 fax

## Release Form

### CAUTION: THIS IS A RELEASE! READ BEFORE SIGNING.

I acknowledge that the use of the services, activities, and facilities of Dakotah Sport & Fitness carry a risk of serious personal injury or death. In particular, I acknowledge that the use of the Rock Climbing Wall carries a risk of serious personal injury or death. In consideration for the permission to use the facilities of Dakotah Sport & Fitness, I hereby remise, release and forever discharge, for me and my heirs, executors, administrators and assigns, Dakotah Sport & Fitness and the Shakopee Mdewakanton Sioux (Dakotah) Community ("the released parties"), of and from any and all claims, demands, rights and causes of action whatsoever kind of nature, arising from or by reason of any kind and all known and unknown, foreseen and unforeseen bodily and personal injuries, damages to property, negligence or strict liability of "the Released Parties", and the consequences thereof, resulting from my use or my child or ward's use (if applicable) of the services, activities and facilities of Dakotah Sport & Fitness.

Nothing in this release is intended to be, nor shall be interpreted as, a waiver of any kind of the Shakopee Mdewakanton Sioux (Dakotah) Community's sovereign immunity from suit.

I hereby declare that I am of adult age; I have carefully read the foregoing release and know the contents thereof, that I may not use the services, activities or facilities of Dakotah Sport & Fitness without signing this release and that I sign it as my own free act.

---

Date

---

Printed Name of User

---

Signature of User or User's Parent or Legal Guardian

---

Printed Name of Parent or Legal Guardian (if applicable)