



Mount Madonna High School ANNUAL RAFTING TRIP – 2026

Dear High School Students and Parents,

Please read all of this carefully even if you think you ALREADY know what it says.

We are very happy to start the year off again with a white water rafting trip on the American River outside of Sacramento. We are contracting with H2O Adventures, our hosts for many years. MMS will be holding an orientation for new high school parents and students on **Monday, August 19, 2026**. Rafting Trip details and questions will be addressed (ALL incoming 9th graders and all *new* high school students are requested to attend).

We leave Monday, August 31 and return on Thursday, September 3. Students should bring their bags to the school bus stop if they are bus riders. Buses will transport the students and baggage. Upon arriving at school, please drop students off at the front of the school as per usual, and have your child bring their bags behind the Assembly Room. Do NOT drive behind the Assembly room as the vans need that space for loading. There will be a short orientation Monday morning before departure.

Return: We should return to MMS at approx. 2:30 pm. Bus riders will return to campus in time to take the bus home. The school office will send out an automated message regarding any update to the arrival time.

Start of year trips:

The days we are gone are considered part of the school year and as such there are requirements that must be met if a student does not participate in the trip. If a student chooses to not participate for any reason other than illness or a pre approved reason, they are required to come to school to participate in 4 community service hours per school day missed. If your child will not be attending the river rafting trip please contact Upper School Director, Karla Bell at karla.bell@mountmadonnaschool.org to discuss.

Trip Cell Phone Policy:

Chaperones will collect all student cell phones upon arrival at the campground. Students may check out their cell phones in the evening for the sole purpose of contacting their parents/guardian. Cell phones must be returned to a chaperone at the end of the call.

PACKING LIST

Students MUST bring the following items. Pack light; our van space is limited, so students should limit their packing to a backpack and a small bag (that can hopefully contain a sleeping bag as well).

1. Water bottle
2. Sunscreen
3. Hat
4. Bathing suit
5. Water shirt and shorts for rafting
6. Tennis or river shoes or teva-like sandals (*You must have shoes that can get wet and are strapped to your feet.*)
7. Jacket or sweatshirt
8. Towel
9. Change of clothes
10. Toothbrush & toothpaste
11. Pajamas
12. Sleeping bag (*Please bring in a small stuff sack. If your sleeping bag is a large roll, please borrow one that stuffs compactly.*)
13. Sleeping pad (small roll)
14. Medications - prescription or over the counter***(SEE REQUIREMENTS ON THE NEXT PAGE REGARDING MEDICINES)
15. Pack a lunch or bring money for lunch on Monday & Thursday and for other occasions (recommended \$25).

We look forward to the trip!

The MMS Rafting Team

Student: Last Name _____ First Name: _____ Grade: _____

**PERMISSION SLIP - MMS 2026-2027 – DUE AUGUST 19, 2026
HIGH SCHOOL RAFTING TRIP**

Please fill out and return this **Permission Slip AND the Waiver of Liability and Release Agreement from H2O Adventures.**

I give my permission for: _____

(student, first and last name)

to attend the rafting trip on **August 31 - September 3.**

Student Conduct. I understand that the Rafting Trip is a School event. Students are expected to abide by all School rules, including those in the Student Handbook. I acknowledge that any misconduct by the above named student may result in them being sent home early from the trip.

Parent Signature: _____ Date: _____

I agree to adhere to the MMS rules and expectations as described above and understand the terms of dismissal from the field trip.

Student Signature: _____ Date: _____

Swimming Ability

In order to provide as positive an experience as possible, please share with us your child's comfort level in the water. Please note that all participants will wear a life vest. Knowing your child's comfort level in the water will help us assign them to particular rafts/chaperones.

- Extremely confident in the water
- Somewhat confident in the water
- Not confident in the water
- Can't swim

***REQUIREMENTS REGARDING MEDICATIONS AND/OR ALLERGIES**

Will your child be taking medications while at camp? Yes No

Will your child be self-administering while at camp? Yes No

PLEASE let us know if your child has peanut or other allergies Yes No

If your child will be taking *any* medications during the trip, those medications (prescription and non-prescription) must be in their original container (medication name, dosage, and for prescriptions the provider name and number). Please contact the office at 408-847-2717 if you need assistance or email registrar@mountmadonna.org.

*If you are dropping off medications for the trip, please go to the school office to have that medication logged with our staff. Do not give medications to the chaperones before the trip, as they cannot accept them.

Return this form to MMS by **August 19, 2026**

Email to registrar@mountmadonnaschool.org, Fax to 408-847-5633 Or Mail to Attn: Laurie Struckmeyer, Registrar, Mount Madonna School, 491 Summit Road, Mount Madonna, CA 95076

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

This is a release. Read it carefully before signing. This release essentially states that I know I am going on a whitewater-rafting trip in a wilderness/ outdoor environment not on an amusement park ride or to an air-conditioned shopping mall. As a result of the inherent risks in this activity, I know I may die, get hurt, or damage my belongings. If any of these occur, I understand that I cannot make a claim, sue, or expect H2O Adventures LLC, its owners/members, officers, agents, employees, associates, the State of California, its Department of Parks and Recreation, the U.S. Bureau of Reclamation, Pacific Gas and Electric Company, Placer County Water Agency, and Sacramento Municipal Utility District (hereinafter referred to collectively as H2O Adventures LLC) to be legally responsible or pay for any damages.

ACKNOWLEDGMENT AND ACCEPTANCE OF RISKS: I, the undersigned, hereby acknowledge that I have voluntarily chosen to go on this whitewater-rafting trip with H2O Adventures LLC. Certain risks are inherent in any recreational activity and cannot be eliminated, altered, or controlled, and these risks that contribute to the unique character of the activity can also be the cause of injury, illness, death, and damages. I know and fully understand that a whitewater rafting trip, whether on a raft, oar boat, kayak, or any other type of vessel, is an outdoor adventure activity in wilderness environment with inherent risks and hazards where serious accidents can occur, participants can die, sustain injuries and property damage. Also, I understand that Class IV and V represent the most difficult and dangerous levels of whitewater and recognize that the risks associated with whitewater rafting are greatly increased.

- I acknowledge and willingly assume all risks and hazards in whitewater rafting and river-related camping from the pre-embarkation rendezvous until the conclusion of the trip, including, but not limited to, (1) loss of control of the raft, falls in, out, or about the raft, collision with other participants, equipment, other rafts, rocks, trees, and any portion of the interior of the raft, and any other man-made or natural obstacles, whether obvious or not; (2) judgment, decision-making and conduct of the guides; (3) submersion in water, drowning; (4) encounters with animals, wildlife and insects; (5) exposure to wilderness environment, extreme temperatures, and inclement weather, remote areas, wilderness terrain, including travel by foot or vehicle in any way related to this activity, whether at camp or elsewhere; (6) assistance in lifting and/or carrying rafting equipment; (7) rescue-related injuries; and (8) unavailability of immediate and appropriate medical attention in case of injury.
- I further understand and acknowledge that H2O ADVENTURES provides foot cups in some of its boats to assist participants in stabilizing themselves. The use of foot cups may present an increased risk of knee, ankle, or other injuries because of their restrictive nature. Use of foot cups is totally voluntary.
- I understand and acknowledge that the above list is not complete or exhaustive, and that other risks, known or unknown, anticipated or unanticipated, may also exist and result in injury, illness, disease, death or damage. My participation in this activity is purely voluntary and I elect to do so at my own risk.

RELEASE: In consideration for H2O Adventures LLC allowing me to participate on this trip, I voluntarily agree to release, discharge, and hold harmless H2O Adventures LLC and for any and all claims of liability arising out of their negligence, fault, recklessness, or any other act or omission which causes the undersigned illness, injury, disease, death, and damages of any nature in any way connected with my participation in this rafting activity. I also expressly agree to release and discharge H2O Adventures LLC from any act or omission of negligence in rendering or failing to render any type of rescue, emergency or medical services. In signing this document, I fully recognize and understand that if I (or any minor on whose behalf I am signing this release) am hurt, die, or my property is damaged, I am giving up my right to make a claim or file a lawsuit against H2O Adventures LLC, even if they negligently or by some other act or omission cause the injury or damage.

- I further agree, to hold harmless, defend, and indemnify H2O Adventures LLC from all defense costs, including attorney's fees incurred in connection with claims for bodily injury, wrongful death, or property damage, sustained by any minor under 18 years of age on whose behalf I am signing, or which I may have caused to spectators or other third parties, whether negligent or not, in the course of my participation in this activity.
- As parent or legal guardian of a participant under 18 years of age, I have read and voluntarily agree that said minor may participate in this whitewater rafting trip, and I sign this release on their behalf and on the behalf of the minor's parents and/or legal guardians. In addition, I give H2O Adventures LLC permission to treat said minor in case of illness, injury, emergency, or accident. Should emergency medical services become necessary, for the undersigned participant or minor, the expenses are the sole responsibility of the participant and not that of H2O Adventures LLC. Personal medical and travel insurance is strongly advised for all participants.
- H2O Adventures LLC reserves the right to accept or deny service to any person. I hereby agree to follow all rules, regulations, and instructions of H2O Adventures LLC while on this trip. I also certify that I and any minor, on whose behalf I am signing, are physically and mentally capable of participating in these activities. I hereby represent that I have informed H2O Adventures LLC of any pertinent medical conditions that may affect my or the minor's participation in these rafting activities. I hereby agree that H2O Adventures LLC may use film or photographic records of this rafting trip for its promotional and/or commercial purposes. The Venue of any dispute that may arise out of this agreement or otherwise between the parties to which H2O Adventures LLC or its agents is a party shall be either the town of Colfax, California, Justice Court or the County or State Supreme Court in Placer County. Guide school/skills workshop participants: I understand that H2O Adventures LLC is not certifying my guiding proficiency or readiness to go to another outfitter and guide right away after this training. I understand I will need additional extended training and practice to acquire proficiency in the skills being taught.

I HAVE READ THIS DOCUMENT IN ITS ENTIRETY. I UNDERSTAND THAT I AM ASSUMING ALL THE RISKS INHERENT IN THIS WHITE WATER RAFTING ACTIVITY. I UNDERSTAND THAT IT IS A RELEASE OF ANY AND ALL CLAIMS. I UNDERSTAND THAT THIS IS THE ENTIRE AGREEMENT BETWEEN THE UNDERSIGNED AND H2O Adventures LLC, THEIR OWNERS, OFFICERS, AGENTS, AND EMPLOYEES, AND THAT IT CANNOT BE MODIFIED OR CHANGED IN ANY WAY BY THE REPRESENTATIONS OR STATEMENTS BY H2O Adventures LLC OR BY THE UNDERSIGNED. I VOLUNTARILY SIGN MY NAME AS EVIDENCE OF MY ACCEPTANCE OF ALL THE PROVISIONS IN THIS RELEASE AND MY AGREEMENT TO BE BOUND BY THEM.

Name (Please Print) _____ **Date of Birth** _____

Address _____

Email _____

Rafting Date 08/31/26 – 09/03/26 **River** American

River

Are you older than 18? Y or N

If no, guardian sign here



Signature Date _____