



## DURING SCHOOL ON-CAMPUS EVENT PERMISSION FORM

|                                                    |                               |                                  |
|----------------------------------------------------|-------------------------------|----------------------------------|
| School Name<br><u>Desert Shadows Middle School</u> | Student Name<br>_____         | Student Grade<br>_____           |
| Event Type<br><u>Sickwinder Camp</u>               | Event Location<br><u>DSMS</u> | Event Fee/Cost<br><u>\$30.00</u> |

|                                    |                                                                                                      |
|------------------------------------|------------------------------------------------------------------------------------------------------|
| Start Date<br><u>July 29, 2026</u> | Approx. Start Time<br><u>8:30</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM |
| End Date<br><u>July 29, 2026</u>   | Approx. End Time<br><u>11:30</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM  |

|                                                      |  |  |  |
|------------------------------------------------------|--|--|--|
| Event Description - Include Attractions & Activities |  |  |  |
|                                                      |  |  |  |

|                                                                  |                                                           |                                                                |                                                                    |
|------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Bring Own Food & Drink                  | <input checked="" type="checkbox"/> Food & Drink Provided | <input type="checkbox"/> Exposure to Cool Weather              | <input checked="" type="checkbox"/> Exposure to Warm/Sunny Weather |
| <input checked="" type="checkbox"/> Involves Extended Standing   | <input type="checkbox"/> Involves Extended Walking        | <input checked="" type="checkbox"/> Involves Physical Activity | <input type="checkbox"/> Exposure to Flashing Lights               |
| <input checked="" type="checkbox"/> Exposure to Loud Music/Noise | <input type="checkbox"/> Exposure to Animals/Insects      | <input type="checkbox"/> Water Activities/Water Hazards        | <input type="checkbox"/> Bring Extra Clothes/Shoes/Towel           |

|                                                                                                                                                                                                                          |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Notice of Insurance Coverages                                                                                                                                                                                            |  |  |  |
| The Paradise Valley Unified School District does not carry health, medical, life, or disability insurance for it's students and therefore it is up to the parent/guardian to provide such coverages for their own child. |  |  |  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Indemnification & Hold Harmless Agreement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |
| I, as the parent/guardian, understand and acknowledge that participating in any event carries with it some degree of risk whereby injury, illness, and even death could occur as an outcome. I understand and acknowledge that these potential risks exist and allow my child to participate in this event despite the known risks and willingly accept full responsibility for any injuries and/or illnesses my child should happen to cause or incur while participating in this event, including all medical care and related expenses. In addition, I accept full responsibility for my child's personal items that may become lost, stolen, or damaged while participating in this event. I understand and acknowledge that as a condition of participation in this event, I as the parent/guardian agree to indemnify, defend, and hold harmless to the fullest extent permitted by Arizona law, the Paradise Valley Unified School District and its schools, officers, employees, agents, representatives, and volunteers from and against all liability claims including injuries, illnesses, and property damages, as well as other claims, losses, and legal costs, of any kind or nature, resulting from or in connection with this event. |  |  |  |

|                                                                                                                                                                                        |                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| I, as the legal parent/guardian of the child named above, understand and agree to the terms and conditions as stated above and willingly permit my child to participate in this event. | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|

|                               |                              |      |
|-------------------------------|------------------------------|------|
| Print Name of Parent/Guardian | Signature of Parent/Guardian | Date |
|-------------------------------|------------------------------|------|

This is a two-sided document. →



# SIDEWINDER CAMP



July 29th, 2026 - 8:30am-11:30am  
*Drop-off will begin at 8am in the gym.*

REGISTRATION FORM - DUE JULY 15, 2026

Student Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent Cell Number: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Emergency Name and Number: \_\_\_\_\_

Elementary School Attended: \_\_\_\_\_

Check The Appropriate Line:

\_\_\_\_\_ My child is enrolled for 7th grade at Desert Shadows Middle School for the 26-27 school year.

\_\_\_\_\_ My Child will be in eighth grade (NEW TO DSMS) for the 2026-2027 school year.

T-shirt Size (Circle One) (Adult Sizes Only)      S      M      L      XL      XXL

Permission to Video/Photograph (Circle One)?      YES      NO

If your child has a medical condition, please indicate that here

\_\_\_\_\_  
\_\_\_\_\_

**REGISTRATION FORM, PERMISSION FORM & PAYMENT IS DUE BY JULY 15, 2026**

The requested donation for Sidewinder Camp is \$30; this covers the cost of a t-shirt, cinch-sack and a snack.  
*Payment can be made via our online portal, exact cash or check.*

**PLEASE NOTE ALL FEES ARE NON-REFUNDABLE.**

- Online Payment Portal: [https://az-paradisevalley-lite.intouchrecepting.com/DSMS\\_StudentCouncil](https://az-paradisevalley-lite.intouchrecepting.com/DSMS_StudentCouncil)
- Completed forms along with exact cash or check (student name on memo line) can be dropped off at school by May 21st or mailed by July 1, 2026.
- Registration Form & On-Campus Permission Form can be scanned and emailed to [twhittington@pvlearners.net](mailto:twhittington@pvlearners.net).
- Registration Form & On-Campus Permission Form can be dropped off at DSMS by May 21st or mailed by July 1st, 2026:

*Desert Shadows Middle School  
5858 East Sweetwater Avenue  
Scottsdale, AZ 85254*

**The DSMS office will be closed from June 5th to July 10th.  
Questions? Please call Tracy Whittington at 602-449-6800.**