

Informed Consent/Permission for Extra-Curricular or Co-Curricular Trips, Field Trips and Excursions

(Students Under 18 Years) To be completed for all off-campus trips including extra-curricular trips, co-curricular trips, field trips, excursions within Alberta, and excursions within Canada

School		Neerlandia Public Christian School					
Class/Group		Kindergarten			Number of students:	29	
Lead Teacher Name	Mrs. H	lenschel	Dates of Trip:	Thurs., March 5, 2020			
Event and Destination	Kindergarten students to go to Barrhead to visit RCMP, Fire & Ambulance & Shepherd's Care						
Post-event Pick Up Procedure (Teacher)	Stude	nts will be transported by bus.	Other Pick-Up Arrangements	(to be completed by Parent, if required)			

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.

A. MODE OF TRANSPORTATION: School Bus X Volunteer Vehicle ___ Other (specify)

PARENTS, please note: Please call (780) 674-8509 to ensure that the bus driver is aware of any concerns or conditions specific to your child. **B. ELEMENTS OF RISK:**

Educational activity programs, such as <u>field studies</u> involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury which may result from participating in field studies.

List all Elements of Risk:

Broken bones	s, sprains or strains,	other mishaps	related to activity.
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The risk of sustaining these types of injuries result from the nature of the activity and can occur without fault of either the student, or the school board, its' employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured. The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

If you choose to participate in <u>Kindergarten field study</u> on <u>Mar. 5, 2020</u>, you must understand that you bear the responsibility for any injury that may occur.

Pembina Hills Regional Division No. 7 does provide student accident insurance on behalf of the students participating in this activity. The student accident insurance policy is purchased through Industrial-Alliance Pacific (Box 5900, Vancouver, BC V6B 5H6) and policy details are available at the school, board office and/or by calling Industrial-Alliance Pacific at 1-800-556-7411.

C. ACKNOWLEDGEMENT

WE HAVE READ THE ABOVE. WE UNDERSTAND THAT BY PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.

Signature of Student:

Signature of Parent/Guardian: _____

D. PERMISSION

l give	permission to participate in the
(name of student)	
to be held on or about	Thurs., March 5, 2020
	(date)

Kindergarten field study to Barrhead
(description of activity)

Date:

Date: