

FIRST DAY OF SCHOOL – 2018 SEPTEMBER 04

DON'T FORGET TO BRING YOUR FORMS.

PRINCE OF WALES

GRADES 9-12

BACK TO SCHOOL FORMS

Please fill out forms 1-3 and return to school the week of 2018 September 04

Forms 4 & 5 can be returned to the office and put into the Pink PAC Donations Box

- 1) PW Emergency Medical Information Sheet**
- 2) VSB Personal Information & Outside Media Consent**
- 3) VSB Emergency Reunification Form – your child will receive this in homeroom on Sept. 05**
- 4) PAC Direct Appeal 2018-2019**
- 5) Gift Card Letter & Order Form**



PRINCE OF WALES SECONDARY SCHOOL 2018-19

EMERGENCY MEDICAL INFORMATION SHEET

(Please print clearly)

Student Last Name: _____ Grade: _____

Student Legal First Name: _____

Student Usual Called Name: _____

Care Card #: _____ Student #: _____

Does your child have any of the following medical conditions which may require emergency care at school?

- Severe asthma
- Life-threatening allergy (anaphylaxis)
- Seizure disorder/epilepsy
- Diabetes

Other: _____

None of the above: Please ignore questions 2, 3 and 4 and complete Contact Information and Consent.

Is there anything the school needs to know about this condition?

In the event of a medical emergency at school, what action is necessary for the above condition?

Prescribed medication(s) for chronic conditions: _____

CONTACT INFORMATION:

Contact Name: _____ Telephone #: _____ Telephone #: _____

Alternate Contact: _____ Telephone #: _____ Telephone #: _____

- If your child needs assistance or supervision to take a medication at school, please indicate.
- It is the responsibility of the parent/guardian to provide the school with any medication the student may require.
- Inform the school if the student's emergency contact information or health condition changes during the year.

CONSENT:

I hereby authorize the supervising teacher to obtain medical treatment for my son/daughter should the need arise. Should a need for medical treatment arise the supervisor will make an effort to contact the parent or guardian.

Signature of Parent/Guardian

Date

PLEASE SIGN AND DATE AND RETURN TO THE SCHOOL OFFICE

The information on this form is collected under the authority of the School Act, Sections 13 and 97. The information will be used for education programs and administrative purposes and, when required, may be provided to health services, social services or other support services as outlined in Section 97 (2) of the School Act. The information will be protected under the Freedom of Information and Protection of Privacy Act. If you have questions about the collection or use of this information, please contact your school principal.

**2**

Important Information – Please Translate
这是一份重要信息 — 请找人为您翻译
這是一份重要資訊 — 請找人為您翻譯

Name: _____

这是一份重要信息 — 请找人为您翻译 Thông tin quan trọng - Xin phiên dịch
Mahalagang Impormasyon - Paki salin sa sariling wika Información importante - Por favor traducir

Vancouver School Board Personal Information and Media Consent 2018-2019

Consent for publicity through VSB online channels and publications

Schools and Districts are authorized to collect, use, and share student personal information that is directly related to and necessary for their educational functions. For other school or education-related purposes, parental or student consent is required.

The Vancouver School Board is seeking your consent to collect, keep, use and share photographs, videos, images, and/or names of students to use on school or district website(s), district publications, e-newsletters, posters, social media sites and videos for education related purposes, such as recognizing and encouraging student achievement, building the school community and informing others about school and district programs and activities.

Please check **A** OR **B** (not both)

- A. _____ **I GIVE MY CONSENT** for the school or District to collect, use, and share my child's name and/or image for purposes consistent with the above. I understand that images and information posted on the internet may be accessed outside of Canada.

This consent may be withdrawn at any time in writing, but withdrawal of consent does not require the school or school district to take any steps to withdraw from publication any previously published material. Unless withdrawn, this consent is effective immediately and lasts until September 30 of the next school year.

- B. _____ **I DO NOT CONSENT** to the use and disclosure of my child's name and/or image for the above purposes for this school year.

Consent for publicity through outside media outlets

Media (including radio, television, newspapers, and other print and online media) are sometimes permitted or invited to come to the school or to school activities and allowed to take photos or video or conduct interviews with students, for the purposes of promoting public understanding of school programs, building public support for public education and encouraging student achievement.

If you do **not** want your child to be involved in such activities, you need to:

- Tell your child to avoid these situations,
- Tell your child's teacher of your wishes,
- Complete and return this form to ask the school and school district to take reasonable steps to avoid this type of publication of your child's name, image, grade, or views by outside media.

Note that school and district staff cannot control news media access, photos/videos taken by the media or others in public locations (such as field trips or off school grounds) or school events open to the public, such as sports events, student performances, school board meetings, etc.

Please check A OR B (not both)

A. _____ I GIVE MY CONSENT for my child to participate in media interviews or to be photographed or video-taped by media for the purposes of promoting public understanding of school programs, building public support for public education and/or encouraging student achievement.

This consent may be withdrawn at any time in writing, but withdrawal of consent does not require the school or school district to take any steps to withdraw from publication any previously published material. Unless withdrawn, this consent is effective immediately and lasts until September 30 of the next school year.

B. _____ I DO NOT CONSENT and request that the school district and its staff take all reasonable steps to avoid having my child's image or name collected or published by outside media when they are present in school or at school activities at the invitation of the school or school district.

Please complete, sign, and return to your school.

Date: _____

Student's Name: (Last) _____ (First) _____
(please print)

School: _____ Division _____

Parent's Name: (Last) _____ (First) _____
(please print)

Parent/Guardian* Signature: _____

**For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.*

If you have questions about this consent or about the collection of student personal information, you may contact:

VSB Communications

Business Address: Communications Department, Vancouver School Board,
1580 West Broadway, Vancouver BC, V6J 5K8

Email: communications@vsb.bc.ca



Prince of Wales PAC Direct Drive 2018 - 2019

Dear Prince of Wales Parents and Guardians:

Each year PW PAC funds the programs and activities that aim to enhance students learning experiences. With your support we have been able make contributions towards fine arts, athletics, leadership, learning commons, science and counselling that make the school a better place for all students. We also contribute to staff appreciation, parent education, dry grad activities, spirit awards and student council events.

If you are able to help us with \$100 per student please do so between now and the end of November 2018. A tax receipt can be provided for donations of \$20 or more.

The direct drive is a great way to support your school. Every dollar counts and will be gratefully received. Should you have any questions please reach out to Elke (porterprvancouver@gmail.com) We are also happy to send you the financial reports & budget, if you like. Thank you for your continued contribution to PW!

Regards,

Elke Porter
PAC Chair

Enclosed is our donation of \$100_____ or Other Amount \$ _____ (cash or cheque)

I would like a tax receipt (for amounts \$20 or more) Yes____ No____

Student Name and Grade: _____

Donor Name and email: _____

Donor Address: _____

Cheques payable to “**Prince of Wales Secondary**”

Please return to **PAC Donation Box** in the School Office, or send to **2250 Eddington Dr. Vancouver BC V6L 2E7** by November 30th, 2018. **THANK YOU!**



PRINCE OF WALES SECONDARY SCHOOL

2250 Eddington Drive
Vancouver, B.C. V6L 2E7
Telephone: 604-713-8974 · Fax: 604-713-8973

Dear Families of PW,

We are excited to introduce a new, on-going fundraising program that will **not cost you one penny. This does not replace our Direct Appeal, but as a supplement that can easily raise extra funds to improve technology in our school.**

PW PAC will provide order forms every month for families to purchase plastic gift cards from large, well-known retailers. For every card that is purchased, a small percentage will go back to PAC. Some of the cards are reloadable which means you just reload those cards in-store or online. This program is meant primarily for family weekly shopping but can also be used for gift giving.

How the Program Works:

1. Print out and complete form every month (website link coming soon)
2. Submit completed form with payment in designated, secured mailbox outside auditorium.
3. All orders must be in a sealed envelope and include the order form. Cheque only, payable to "Prince of Wales PAC". NO CASH.
4. Pick up your gift cards during designated times. Students may pick up the cards if given authorization on order form.
5. Photo ID MUST BE SHOWN in order to pick up orders.

Due Date:	Order pick Date and Time in front hall by the Auditorium
September 13 th	September 20 th 11:35-12:40, 3:00-3:30
October 11 th	October 18 th 11:35-12:40, 3:00-3:30
November 16 th	November 30 th 11:35-12:40, 3:00-3:30

The average family spends \$6,000 - \$7,000 on groceries each year. If even 100 families can purchase \$100 per week on all household purchases from participating retailers, the school can earn \$20,000 this school year!

Let's all participate by just pre-planning your regular weekly household purchases at retailers offering to support our school!

Sincerely,

PW PAC Fundraising Committee

SUPPORTER ORDER FORM

NAME OF SUPPORTER: _____
 ADDRESS: _____
 NAME OF PARENT: _____
 NAME OF PERSON(S) DESIGNATED FOR PICK UP: _____

PHONE NUMBER: _____
 POSTAL CODE: _____
 GRADE/CLASS: _____

DATE: _____
 EMAIL: _____

<u>MERCHANT(FEE)</u>	<u>CERTIFICATES</u>	<u>TOTAL</u>	<u>MERCHANT(FEE)</u>	<u>CERTIFICATES</u>	<u>TOTAL</u>
<u>Department Stores:</u>			<u>Specialty Stores:</u>		
Hudson's Bay (Hbc, Home Outfitters)	X _____ _____ _____	\$25.00 \$50.00 \$100.00	Shoppers Drug Mart	X _____ _____ _____	\$25.00 \$50.00 \$100.00
<u>Fuel:</u>			Sport Chek	X _____ _____ _____	\$25.00 \$50.00 \$100.00
Esso	X _____ _____ _____	\$50.00 \$100.00	Staples	X _____ _____ _____	\$25.00 \$50.00 \$100.00
Petro-Canada	X _____ _____ _____	\$50.00 \$100.00	Starbucks	X _____ _____ _____	\$10.00 \$25.00 \$50.00
Shell	X _____ _____ _____	\$25.00 \$50.00	Winners / Marshalls / Home Sense	X _____ _____ _____	\$100.00 \$25.00 \$50.00
<u>Home Improvement:</u>			<u>Specialty Stores:</u>		
Home Hardware	X _____ _____ _____	\$25.00 \$50.00	American Eagle	X _____ _____ _____	\$25.00 \$25.00
Rona	X _____ _____ _____	\$100.00	Bath and Body Works	X _____ _____ _____	\$25.00
<u>Grocery Stores:</u>			Canadian Tire	X _____ _____ _____	\$50.00
Choices Market	X _____ _____ _____	\$25.00 \$100.00	Chapters/Indigo/Coles	X _____ _____ _____	\$100.00
MarketPlace IGA	X _____ _____ _____	\$250.00	i-Tunes	X _____ _____ _____	\$25.00 \$50.00 \$10.00
Reloadable	X _____ _____ _____	\$50.00	M&M Meat Shops	X _____ _____ _____	\$25.00
Loblaws(Shop Easy,	X _____ _____ _____	\$25.00	Mark's Work Wearhouse	X _____ _____ _____	\$25.00 \$50.00
Extra Foods, Superstore, Lucky	X _____ _____ _____	\$250.00	Options (Gap, Old Navy, Banana Republic)	X _____ _____ _____	\$100.00 \$25.00 \$50.00
Doll: Safeway, Sobseys and City Thrifty Foods	X _____ _____ _____	\$25.00 \$50.00	Petsmart	X _____ _____ _____	\$25.00
Stong's	X _____ _____ _____	\$100.00	Tim Hortons	X _____ _____ _____	\$10.00
<u>Entertainment:</u>				X _____ _____ _____	\$25.00 \$50.00
Cineplex Odeon	X _____ _____ _____	\$10.00			

(Famous Players, Galaxy, SilverCity, Colossus, Paramount)
 WaySpa
 (over 450 spas across Canada)
 www.wayspa.com

_____ X \$25.00 \$ _____
 _____ X \$50.00
 _____ X \$100.00 \$ _____

More Specialty Next Page

MERCHANT(FEE)
Restaurants:

CERTIFICATES **TOTAL**

Boathouse Restaurants	_____ X	\$25.00	\$ _____
Boston Pizza	_____ X	\$50.00	\$ _____
Browns Socialhouse	_____ X	\$25.00	\$ _____
	_____ X	\$50.00	\$ _____
Vancouver Dine	_____ X	\$25.00	\$ _____
(The Teahouse, Seasons in the Park, Cardero's, The Sandbar)	_____ X	\$50.00	\$ _____
White Spot Restaurant	_____ X	\$50.00	\$ _____
	_____ X	\$25.00	\$ _____
Cactus Club	_____ X	\$50.00	\$ _____
	_____ X	\$25.00	\$ _____
Earls	_____ X	\$50.00	\$ _____
	_____ X	\$25.00	\$ _____
Joey Restaurant	_____ X	\$50.00	\$ _____
	_____ X	\$25.00	\$ _____
Keg	_____ X	\$50.00	\$ _____
	_____ X	\$25.00	\$ _____
Moxie's	_____ X	\$50.00	\$ _____
Old Spaghetti Factory	_____ X	\$100.00	\$ _____
Red Robin	_____ X	\$25.00	\$ _____
	_____ X	\$25.00	\$ _____
Subway	_____ X	\$10.00	\$ _____
	_____ X	\$25.00	\$ _____
	_____ X	\$50.00	\$ _____

GRAND TOTAL: \$ _____

PAYMENT INFORMATION: Cheque # _____
 **Cheque payable to Prince of Wales PAC
 Total Order: \$ _____

Thanks for your support!

Please note the following cards are also available as reloadable cards; MarketPlace IGA and Fairway Market.
 Questions? Email our Fundraising PAC Executive at cgauthier@telus.net

Revised May 2018