

Queen Elizabeth Annex

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To Parents and Guardians:

The purpose of this form is to inform you about a proposed field trip involving your child and to seek your support and permission for your child to participate.

This is an important document. Please review its contents carefully prior to providing permission for your child to participate in this excursion. Field trips provide students with valuable learning experiences. However, should you not wish your child to participate in this activity, school staff will assign other learning activities at the school.

Nature of Field Trip

Division: 1	Teacher(s): Mme Teresa Wells	
Destination: Indigenous Sports Hall of Fame – BC Place Stadium		
Activity: Tour of the Indigenous Sports Hall of Fame		
Date: 27 September 2018	Time Leaving: 9:00AM	Time Returning: 2:30PM
Transportation: public transit		*Cost of Trip: \$5 (bus fare)
Teacher in Charge: Mme Teresa Wells	Number of Volunteers: 2	
Number of Students Attending: 15	Bagged Lunch: yes	
Children Should Bring: clothing appropriate to the weather - we will be outdoors for part of the day		
Special Safety Information: none		

*Our policy is that no child may be denied permission to participate in a field study due to financial reasons. If the cost of the activity would make it impossible for your son/daughter to participate, please advise your child's teacher, then sign the permission form and return it to school and he/she will participate in the activity.

Signature of Vice-Principal

Signature of Teacher in charge

Parent/Guardian Permission

While school staff will take reasonable steps to prevent injuries to students, some degree of risk is inherent in the nature of this activity, and may occur without fault on the part of the student, school board, its employees or agents, or the facility where the activity is taking place. By allowing your child to participate in this activity, you are agreeing that the activity described above is suitable for your child, and that there is a risk of injury associated with the activity.

Section A: All parents, please complete below:

I, _____, give permission for _____, **Div.1** to participate in the field trip to **Indigenous Sports Hall of Fame**. I understand that my child may be exposed to a risk of injury due to accident while participating in this activity.

Parent Name (print): _____ **Signature:** _____

Phone: _____ **Date:** _____

Comments: (Please include any restrictions or limitations which would prevent your child from fully participating in this trip, or any other special concerns which Board staff should be aware of surrounding your child's participation): ie.- (Epipen/allergies)

Comments:

*******Section B: Parent Volunteers only:**

I am available to accompany and supervise students on this field trip.

Name of volunteer (print): _____ **Signature:** _____

Phone: _____ **Date:** _____