

FIELD TRIPS STUDENT PARTICIPATION CONSENT FORM

APPENDIX I

GUARDIAN PARENT/PERMISSION FOR STUDENT PARTICIPATION

School: _____ **Teacher:** _____
Grade or Program: _____ **Date:** _____
Activity or Event: Alberta Anime Festival held at Bellerose Composite High School in St. Albert, AB

Description of the Proposed Educational Activity(ies) or Event(s):
On Saturday, October 7, 2007, students from the greater Edmonton area will participate in the charity event, Alberta Student Anime Festival at Bellerose Composite High School. I wish my child to utilise the courtesy bus to travel from Edmonton to St. Albert for the festival.

Arrangement for Supervision:
Sherry Lin, a teacher at Harry Ainlay, will supervise the bus ride and will collect this consent form prior to students boarding the bus.

Proposed Itinerary (including method of transportation):

My child will ride the courtesy school bus provided by Bellerose High School from Southgate Shopping Centre(8am)/University (8:15am) [circle one] to the Festival in Bellerose.

The return bus will leave at 8:15pm. My child will/will not [circle one] return on the courtesy bus at 8:15 pm

Student Health or Medical Conditions (of which we should be aware):

Cost to Student (if any): \$By Donation to the Western Guide & Assistance Dog Society

1. I/we acknowledge that:

- there may be inherent physical risks involved with this activity,
- despite reasonable precautions, accidents can occur and the student identified below could possibly sustain personal or physical injury through his or her participation,



- the Board, its employees, or agents will not be held liable for any damage or injury that may occur during this activity except where such damage or injury occurs as a result of the negligence of the Board, its employees or agents.
2. I/we am/are aware that insurance coverage for the student is primarily the responsibility of the parent or guardian.
 3. I/we will inform the organizers of this activity of all pertinent health concerns and physical conditions regarding the student named below.
 4. I/we am/are aware that, as applicable, an alternate “in-school” learning activity will be provided for students not accompanying the group on this activity.
 5. I/We have read and understand the physical activities information above and hereby release St. Albert Protestant Schools from any claims by me/us in regard to this activity except in those circumstances where the board, its employees, or agents are negligent. I/we give consent and permission for _____ (student’s name) to participate in the learning activity described.

Signature of Parent(s) or Guardian(s): _____

Date: _____

Two emergency contact phone numbers:

Name/Number

Relation to Student

