

FIELD TRIP INFORMED CONSENT
BATTLE RIVER REGIONAL DIVISION NO. 31

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

Grades 1 - 5 of Sparling School

is arranging

(school)

To participate in the Terry Fox Run/Walk on September 30, 2020

(description of activity / location / facility)

(description of activity / location / facility)

on **Students will walk or run from the school to Mirror Lake..**

(dates)

ELEMENTS OF RISK:

Educational activity programs, such as Terry Fox Walk/Run, 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:

1. Sprains/fractures
2. Bruises
3. Cuts
4. Scrapes

The *Safety Guidelines for Physical Activity in Alberta Schools* will be followed. 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/the student 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 or allow your child/the student to participate in Terry Fox Walk/Run (*activity*) on September 30, 2020 (*dates*), you must understand that you bear the responsibility for any injury that may occur.

Information about the student that field trip personnel need to know for this excursion (medical/other):

1.

2.

The Battle River Regional Division No. 31 does not provide extensive accidental death, disability, or dismemberment or medical expense insurance on behalf of the students participating in this activity. The Board only provides a basic coverage with limited coverage for Battle River Regional Division No. 31 students in attendance at or participating in any school activity approved and supervised by proper school authority.

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: _____ Date (Month/DD/YY): _____

Signature of Parent/Guardian: _____ Date (Month/DD/YY): _____

PERMISSION (Students under 18 Years):

If the student requires medical attention, I authorize the supervisor(s) to seek necessary medical treatment.

I give _____ (*name of student*) permission to participate in Terry Fox Walk/Run (*description of activity*) to be held on or about September 30, 2020 (*dates*).

Signature of Parent/Guardian: _____ Date (Month/DD/YY): _____

Emergency contact person: _____ Emergency phone: _____

This form may not be amended or modified in any way. If this form is amended or modified in any way, it is understood that the student named herein will not participate in the above-noted activity.
