



CISND
OFF-SITE ACTIVITY(IES) CONSENT OF PARENT/GUARDIAN
AND ACKNOWLEDGEMENT OF RISK FORM A2
 (Local, Low-risk Day Trip)
Our Lady of Lourdes Elementary

School Name

To the Parent(s)/Guardian(s) of: _____ Grade: _____ Homeroom: _____
 Please read the contents of this Consent and Acknowledgement of Risk form. Clarify any questions or concerns with the Lead Teacher BEFORE signing it.
 If this form is not signed and returned to the school by September 15, 2021, your child WILL NOT BE ALLOWED TO ATTEND.

PROGRAM/ACTIVITY INFORMATION

DESTINATION/ACTIVITY: George Pringle lower field and Westbank Centre Park DATE(S) _____ *OR*
 SERIES OF OFF-SITE ACTIVITIES (Specify program): PE classes and other curricular classes where outdoor green space is needed during 2021-2022 school year
 PURPOSE OR EDUCATIONAL GOAL(S): To allow students to use the green space to participate in pe and other curricular activities
 ITINERARY/ACTIVITIES: Use of George Pringle Field and Westbank Centre Park for PE classes and other curricular activities
 METHOD OF TRANSPORTATION: Walking BY: foot
 LEAD TEACHER: Classroom teacher TOTAL NUMBER OF SUPERVISORS PLANNED: 1-2/class
 SUPERVISORY RATIO: _____ dependent on class size
 COST TO THE STUDENT: 0 WHAT TO BRING: athletic clothing or other items dependent on the activity
 OTHER CONSIDERATIONS: _____

SCHOOL RESPONSIBILITIES:

- The School will make every reasonable effort to ensure or ascertain that:
- a. The staff, volunteers and/or service providers involved are suitably trained and qualified.
 - b. The students are adequately supervised over all aspects of the program/activity.
 - c. The location(s) used are appropriate and safe for the activity(ies) and group.
 - d. Equipment used has been inspected and deemed appropriate and safe.
 - e. A Safety Plan is in place to identify and manage known potential risks.
 - f. An Emergency Plan is in place to deal with an injury or illness to any of the students.

POTENTIAL KNOWN RISKS

Potential known risks include the following:
risks associated with walking on sidewalks, risks involved with the curricular activities taking place at the park
 Additional Comments/Requirements: _____

CONSENT AND ACKNOWLEDGEMENT OF RISK

Destination/Activity/Program: George Pringle lower field and Westbank Centre Park Dates: _____

1. I acknowledge my right to obtain as much information as I require about the program or activity and associated risks and hazards, including information beyond that provided to me by the school.
2. I freely and voluntarily assume the risks/hazards inherent in the program/activity and understand and acknowledge that my child may suffer personal and potentially serious injury arising from his/her participation.
3. My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service provider's administrators, instructors, and supervisors over all phases of the program/activity.
4. In the event that my child fails to abide by these rules and regulations, disciplinary action may require his/her exclusion from further participation, or that I can be contacted to have him/her picked up, unless I have specified other transport arrangements.
5. I acknowledge that it is my responsibility to advise the Lead Teacher of any medical and/or health concerns of my child that may affect his/her participation in the stated program or activity.
6. I acknowledge that the trip supervisors may secure transport to emergency medical services as they deem necessary for my child's immediate health and safety, and that I shall be financially responsible for such services.
7. Based on my understanding, acknowledgement, and consents as described herein,

 Name of student _____ Date of birth _____ has my permission to participate.

Date _____ Parent/Guardian Name (please print) _____ Signature of Parent/Guardian _____

Parent/Guardian Contact Numbers: Day: _____ Evening: _____