

PARENT/GUARDIAN/ADULT STUDENT INFORMATION AND CONSENT FOR ONGOING OFF-CAMPUS ACTIVITIES
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Ongoing curricular field trips are defined as off-campus activities, which are part of the curriculum and occur frequently as part of the program. Examples are physical education recreation courses including activities such as skating or golf, or music courses involving a schedule of off-campus concerts.

Ongoing co-instructional field trips are defined as scheduled off-campus sporting events, performances or competitions. Examples are sports team league games, tournaments, and playoffs, choir performances and drama competitions.

For all ongoing curricular and co-instructional field trips, teachers will attach to this form a complete itinerary/schedule showing the times, locations, dates and other arrangements. Please note that dates may change due to unforeseen circumstances.

Activity: _____

Teacher(s) in Charge: _____

Dates: _____

Medical or Special Concerns/Information: _____

Health Card Number: _____

Element of Risk: The risk of injury exists in every field trip activity. However, due to the very nature of some activities, the risk of injury may increase. Injuries may range from minor sprains and strains to more serious injuries. The safety and well-being of students is a prime concern and attempts are made to manage as effectively as possible, the foreseeable risks inherent in field trip activities.

Medication: If it will be necessary for your child to take prescription medication during the trip, the parent/guardian must complete the form *Administration of Medication* (IS-98-00). It must be forwarded to the Principal prior to the administration of medication. (*If your child currently receives medication during the school day and a copy of this form is on file at the school, it is not necessary to complete another form.)

NOTE: If volunteer drivers are used, I give permission for my son/daughter to travel with a responsible volunteer driver. _____ (please check)

_____ has my permission to participate in the ongoing curricular or co- instructional field trips as described in the attached itinerary/schedule for the current school year.
(Student's Name)

Date

Signature of Parent/Guardian/Adult Student

Home Phone Number

Work Phone Number(s)

Other name and telephone number of person who can be contacted in the event of an emergency:
