

# CLEAR VISTA SCHOOL

INFORMED CONSENT/PERMISSION FORM FOR EDUCATION TRIP

## Mount Robson, Jasper National Park - June 7-10th, 2018

Students that have taken part in the Outdoor Club have the opportunity to go on a camping/hiking trip to Mount Robson, Jasper National Park from June 7th to June 10th, 2018. Mr. Daly and Mrs. Couto along with other volunteers will be supervising the students on this trip. Students will be traveling in the Buck Mountain Central School Van.

All participating students will receive training and instruction prior to the trip. This will include bear safety, food selection/preparation and equipment selection/use. Students will be required to always hike in a group within ear shot of a supervising adult.

All school and division expectations for behavior will apply while on this field trip. Please note that an itinerary and a supply list will be provided to each student.

## ELEMENTS OF RISK

Educational activity programs, such as this 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 this activity.

1. Personal injuries that may occur while taking part in the activities during the Mount Robson, Jasper National Park hiking/camping trip such as: falling, bruising, sprains, broken bones, scratches, bug bites, allergic reactions, drowning, sunburn, heat exhaustion, etc.
2. Traffic accidents that may occur while traveling to/from Mount Robson, Jasper National Park and to/from Clear Vista School.

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 may be injured. The chance of an injury occurring can be reduced by carefully following instruction at all times while engaged in the activity. If you choose to participate in the activities, you must understand that you may bear responsibility for any injury that may occur.

☐ ☒ I, the Parent/Legal Guardian, have read the above, I understand that there are risks associated with participating in the program/activity described above. I assume responsibility to do all within our influence to reduce and eliminate those risks.

☐ ☒ I, the Parent/Legal Guardian accepts that School Board's Student Accident Insurance does not apply during the transportation portions of the trip, and the student is only covered from when he arrives at the school sponsored off-site activity, until he leaves the off-site activity.

## AUTHORIZATION TO PARTICIPATE

Student LAST Name \_\_\_\_\_ Student FIRST Name \_\_\_\_\_

☐ ☒ I am the Parent or Legal Guardian of the above named student

☐ ☒ I have read the above form and understand there are risks associated by participating in the activity as described, and assuming the risks associated with doing so

☐ ☒ I give permission for my child to participate in the activity as described on this form.

Parent LAST Name \_\_\_\_\_ Parent FIRST Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## THE COST TO EACH STUDENT IS \$75.00

**IMPORTANT - a list of parent & emergency contacts/phone numbers will be given to supervisors of this trip. If your information has changed, please be sure to contact the school office prior to the trip to update your information.**