



Fr. Michael Troy
3630 23 St NW
Edmonton AB, Canada T6T 1W7
780-471-1962

Repetitive Events Field Trip Parent Permission Letter

Field Trip Name Multiple Church Visits for Mass

Field Trip Activity VISIT TO A CHURCH

School Travelling With _____

After you have carefully read this letter, we ask that you sign and return *only the* "Parental Consent" portion to the school (the last page in this document). Please keep the remainder for your information and records.

Field Trip Details

We will gather as a Christian Community at Corpus Christi Parish and/or St. Theresa Parish to celebrate our Catholic Faith. Parents, Caregivers and family members are most welcome to join us on the dates attached to this form.

Schedule Attached Yes

Cost Not Applicable

Program of Studies Specific Outcomes

Goal #1: Live and Enhance the Distinctiveness of Catholic Education

Grades Attending 7,8,9

Course(s) Student(s) Registered In

Religion

Number of Attending Students	<u>432</u>
Number of Attending Administrators	<u>2</u>
Number of Attending Teachers	<u>20</u>
Number of Non-Teaching School Staff	<u>0</u>
Number of Attending Volunteers	<u>0</u>
Lead Teacher and Contact	<u>Jeff Fillion (780)471-1962</u>

Attending Administrators, Teachers, Supervisors and Volunteers

7A Jason Moss;7B Jackie Belland;7C Danni Theberge;7D Andrew Malcolm;7E Kathleen Lewis;8A Nicole Rudyk;8B Jill DeGrace;8C Cathy Pagliuso;8D ;Melissa Komar;8E Kevin Thompson;9A Clotilde Grijo;9B Reagan Klevyer;9C Jamie Belous;9D Arlene Doshewnek;9E Sunshine Mauricio;Rod North;Kevin Pighin;Tracy Vetsch;Lindsay Lipsett

Communication Plan

The principal will be advised of any accidents, problems, unusual incidents or weather related concerns that may occur during the field trip. As well parents guardians will be contacted if health issues, injuries, or student conduct are a concern with their children.

Method of Transportation Bus

Carrier Name Cunningham

Telephone # (780) 435-2725

Clothing Required Proper footwear and Church attire (Dress-Code)

Dates of Church Visits for 2019-2020 – All at Corpus Christi unless noted below

Advent – December 19, 2019 @ 10:30 (One class visits St. Theresa – Holy Childhood Mass)

Easter – April 9, 2020 @ 10:30

Farewell Practice (Gr. 9 select students, Band and Choir members only)

Year-end Mass- June 26th, 2020

A. COMMON RISKS

All manner of injuries resulting from use of equipment, materials or facilities.

All manner of injuries associated with participation in planned activities during the trip.

Possible injuries from improper use of equipment resulting in bruises, scrapes, cuts.

Slip/Trip/Fall exposures relating to road/sidewalk conditions, pot holes, trees, stairs, parking lots, ramps, elevators, escalators, water pools.

All manner of injuries resulting from the use of apparatus and equipment.

Slip, Fall exposures with stairs, ramps, uneven flooring, dark areas, seating.

All manner of injuries resulting in muscular and soft tissue injuries including bruises, scrapes, cuts from collisions with the wall, floor, uneven playing surfaces, contact with other participants.

All manner of injuries resulting in dislocations, concussion, whiplash, contusions, sprains, pulled or strained muscles, knee injuries and broken bones.

All manner of head, neck, spinal, facial, eye, nose and/or dental injuries.

Injuries that may result from heat cramps, heat stroke and or fatigue.

Slip/Trip/Fall hazards associated with running and horseplay which may cause bruises, scrapes, cuts, broken bones or concussion.

Weather related risks such as sunny/hot temperatures (Sunburn), high winds, rain, fog, snow, thunderstorms, lightning.

All manner of injuries and/or death which may result in the transportation to and from the facility.

Motor traffic exposures such as crossing streets and intersections, side walk bike traffic, skate boarders, high traffic times, speeding vehicles, blind spots, crosswalks, railway crossings, bus stops, LRT, construction zones.

All manner of injuries and/or death which may result in the transportation and transitions to and from each destination and facility.

VISIT TO A CHURCH

Weather related risks such as freezing temperatures, high winds, snow, ice, sleet, rain, fog, thunder, storms, lightning, sunny/hot conditions.

Motor traffic exposures such as crossing streets and intersections, sidewalk bike traffic, high traffic times, speeding vehicles, blind spots, crosswalks, railway crossings, bus stops. LRT, construction zones.

Slip, Fall exposures with stairs, ramps, uneven flooring, dark areas, seating.

Slip, trip, fall exposures relating to road/sidewalk conditions, pot holes, trees, stairs, parking lots, ramps, elevators.

All manner of injuries and/or death which may result in the transportation to and from the facility.

Date Submitted for Approval Dec 5, 2019

Signatures



Principal (Signature)

J. FILLION

Print Name

DEC 5 2019

Date



J. FILLION

DEC 5 2019

Fr. Michael Troy

PARENTAL CONSENT

Parental Consent and Total Costs (if applicable) due by: Dec 13,2019

Student Name _____ Grade _____

Field Trip Activity VISIT TO A CHURCH

Method of Transportation Bus

Cost Not Applicable

Additional Information / Explanation

MEDICAL CONDITION

The following is a list of my child's medical conditions (including allergies, conditions requiring medication, etc), a list of medication that my child must take and any special instructions regarding medication storage and administration.

I have reviewed and understand the information provided in this Parent Permission Letter, I consent to my child partaking in the field trip(s) as described in the Parent Permission Letter and I agree that this planned activity is acceptable. I also acknowledge and agree that during the planned field trip(s), _____ (name of student) is to act in accordance of the Education Act, Division policy and rules as to student conduct.

I understand that pursuant to Administrative Procedures 260, no parent shall be reimbursed for the loss of any field trip monies if the field trip is cancelled or interrupted for any reason. This includes any form of deposit. However, a parent shall be reimbursed field trip monies if the field trip is cancelled or interrupted and the school has not provided said monies at the time of cancellation to any third party travel-related agency which assisted in organizing the field trip, and the related contract between the district and the agency or the insurance provider permits a refund of field trip monies in the circumstances.

I understand and agree that where circumstances arise during the field trip, such as changes in itineraries or adverse weather or road conditions, the Lead Teacher, in consultation with the Principal, may make changes in itineraries and travel/arrival plans for my child. I understand that a reasonable effort will be made to advise me of such a change.

If my child requires medical attention, I authorize the supervisors to seek necessary medical treatment / Intervention in the event of an emergency.

Parent signature: _____ Name _____ Date: _____

Relationship: Mother Father Other Legal Guardian

Emergency Parent Contact and Phone Number _____