



Sacred Heart School

4419 52 Avenue, Wetaskiwin

AB, Canada T9A 2X7

780-352-5533

Local Field Trip Parent Permission Letter

Field Trip Activity VISIT TO A ZOO

Location/ Destination Storyland Valley Zoo
13314 Buena Vista Road
Edmonton, AB
T5J 2R7
(780)442-5311

Field Trip Details

This fieldtrip will be a whole day full of fun. The children will need to be at the school at the regular time in the a.m. (8:30) and will be back before 3:15 p.m. Just in Edmonton, the children will get to experience and learn about living animals. The children will participate in a scavenger hunt and will explore and investigate what animals need to live and survive.

Date of Field Trip	Start: <u>Jun 12, 2018</u>	Time of Departure <u>9:00 a.m.</u>
	End: <u>Jun 12, 2018</u>	Time of Departure from Venue <u>2:00 p.m.</u>
		Time of Return <u>3:15 p.m.</u>
Cost	<u>Not Applicable</u>	

Integration of the events and activities with Program of Studies / Educational Value

Curricular Connections:

Science: Needs of Animals-The children will learn about the needs of living things.

Grades Attending ecs

Number of Attending Students 39

Number of Attending Teachers 1

Number of Non-Teaching School Staff 1

Number of Attending Volunteers 10

Lead Teacher and Contact Mrs. C. Grant (780) 312-5110 or (780)352-5533

Attending Teachers, Supervisors and Volunteers

Mrs. C. Grant

Mrs. N. Bustin (EA)

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

Equipment Required

The children will need a bag lunch.

Clothing Required

Please make sure to dress for the weather.

If it is sunny provide your child with a hat. Please put sunscreen and bug spray on before you arrive at the school.

If it is raining, provide your child with a raincoat, rain boots and an umbrella. Depending on the weather, we may cancel our trip.

Risks - Inherent, special or unusual risks associated with the field trip

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

Zoo animal hazards like bites, kicks, and attacks from unpredictable animal behavior.

Chemical exposures from chemicals, fertilizers, pesticides that are stored or utilized within a zoo.

Slip/Trip/Fall hazards such as slippery floors, potholes, stairs, ramps, water ponds onsite, muddy conditions, construction areas, fencing, etc.

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

Date Submitted for Approval Mar 22, 2018

Signatures

Verna Sard

Principal (Signature)

Verna Sard

Print Name

May 7, 2018

Date

Charlotte Grant

Lead Teacher (Signature)

Charlotte Grant

Print Name

May 7, 2018

Date

Sacred Heart School
PARENTAL CONSENT

Parental Consent and Total Costs (if applicable) due by: **May 28,2018**

Student Name _____ **Grade** _____

Field Trip Activity VISIT TO A ZOO **Start Date** Jun 12,2018 **End Date** Jun 12,2018

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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 HERE) _____ is to act in accordance of the School Act, District policy and rules as to student conduct. St. Thomas Aquinas Roman Catholic Separate Regional Division #38 does not provide accidental death, disability, dismemberment or medical expense insurance on behalf of the students participating in this activity.

I understand that St. Thomas Aquinas Roman Catholic Separate Regional Division #38 assumes no financial liability to the students and/or their parents/guardians should the board cancel or interrupt an approved student trip / excursion for any reason whatsoever. I understand no parents/guardians shall be reimbursed for the loss of any field trip monies if the field trip/excursion is cancelled or interrupted. This includes any form of deposit. However, a parent shall be reimbursed field trip/excursion 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/excursion, 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 further understand that, in all instances, the board reserves, in full, the right to make any cancellation or interruptions it deems fit.

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/or 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.

I understand and accept the above and provide the St. Thomas Aquinas Roman Catholic Separate Regional Division #38 with the following waiver of liability and RELEASE AND INDEMNIFICATION AGREEMENT. I hereby release the St. Thomas Aquinas Roman Catholic Separate Regional Division #38 and its' staff and agents from any and all liability for any injury sustained regardless of how caused, resulting from participation in the aforementioned field trip/excursion.

My child will attend the event: _____

Alberta Health Care Card Number: _____

Emergency Parent Contact: _____

Emergency Parent Phone Number: _____

My child will NOT attend the event: _____

Parent Signature: _____ Date: _____

Parent signature is required regardless if the child is attending the event or not. This form is REQUIRED to be returned to school.

If you are experiencing financial difficulties please contact the principal in confidence.