



PALLISER REGIONAL SCHOOLS
Informed Consent/Permission Form
for Minor Tours

DETAILS OF TOUR

Nature of Tour: Walking field trips within the Town of Coaldale, including, but not limited to Walkathon

Date: 2020/2021 school year

Time: Leave: 8:30am Return: 3:30 pm

Destination: Coaldale Town Limits

Summary of Activities: Students will be walking throughout the Town of Coaldale in cohorts.

Supervisor(s): Staff of RI Baker Middle School

Transportation Arrangements: School Bus Car: _____
(Name of volunteer providing vehicle with whom child will be traveling)

Commercial Bus Other: Walking

Contact Person: Jason Prebushewski Phone: 403 345 3400

ELEMENTS OF RISK

Educational activity programs such as field trips/Walk a thon 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 injuries which may result from participating in walking and participating in supervised activities (describe activity).

1. Risks associated with outdoor activities, weather, structures and infrastructure.

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 your/your child may be injured.

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

If you choose to participate in such activities during the 2020/2021 school year, you must understand that you bear the responsibility for any injury that may occur.

The Board of Trustees of Palliser Regional School Division No. 26 does not provide accidental death, disability or dismemberment or medical expense insurance on behalf of the students participating in this activity.

ACKNOWLEDGEMENT

We have read the above. We understand that by participating in the activity described above, we are assuming the risks associated with doing so.

Signature of Student

Date

Signature of Parent/Guardian

Date

PERMISSION

I give _____ (name of student) permission to participate in walking field trips within the Town of Coaldale _____ (description of activity) to be held during the 2020/2021 school year.

Signature of Parent/Guardian

Date
