

August 31, 2018

Dear Parent/Guardian:

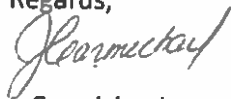
As you know, your son/daughter is a member of Cameron Heights Student Activities Council. This is an excellent leadership opportunity for your child as he/she will be involved in planning, organizing and leading a variety of school events throughout the 2018-2019 school year. To prepare for these events, we have organized a Student Activities (SAC) retreat. This will be held at the Hidden Acres Mennonite Retreat Centre in New Hamburg. We will be leaving CHCI at 11:00am on Monday, September 10th and returning to CHCI at 11:40am on Tuesday, September 11th. This means that each student will only miss one "full" day of school.

As you can see, your child will participate in a number of team building activities which are essential for them to become better acquainted. The SAC leaders work closely throughout the year, and this retreat is important to help facilitate this need. They will also use their time to plan the SAC events for the entire year. The cost for this retreat is \$40.00. This covers the lodging, food and bus expenses. Payment can be made on School Day, and the signed permission form, medical form, and Code of Conduct form are due by Friday, September 7th, 2018.

In terms of supervision, Ms. Waechter, Ms. Kitzman, Mr. Kemp, Me Leung and I will be accompanying the students along with Campbell, the owner of the retreat centre. Hidden Acres has a main lodge as well as 2 large cabins. Female students will sleep in one area while the Male students will lodge in another.

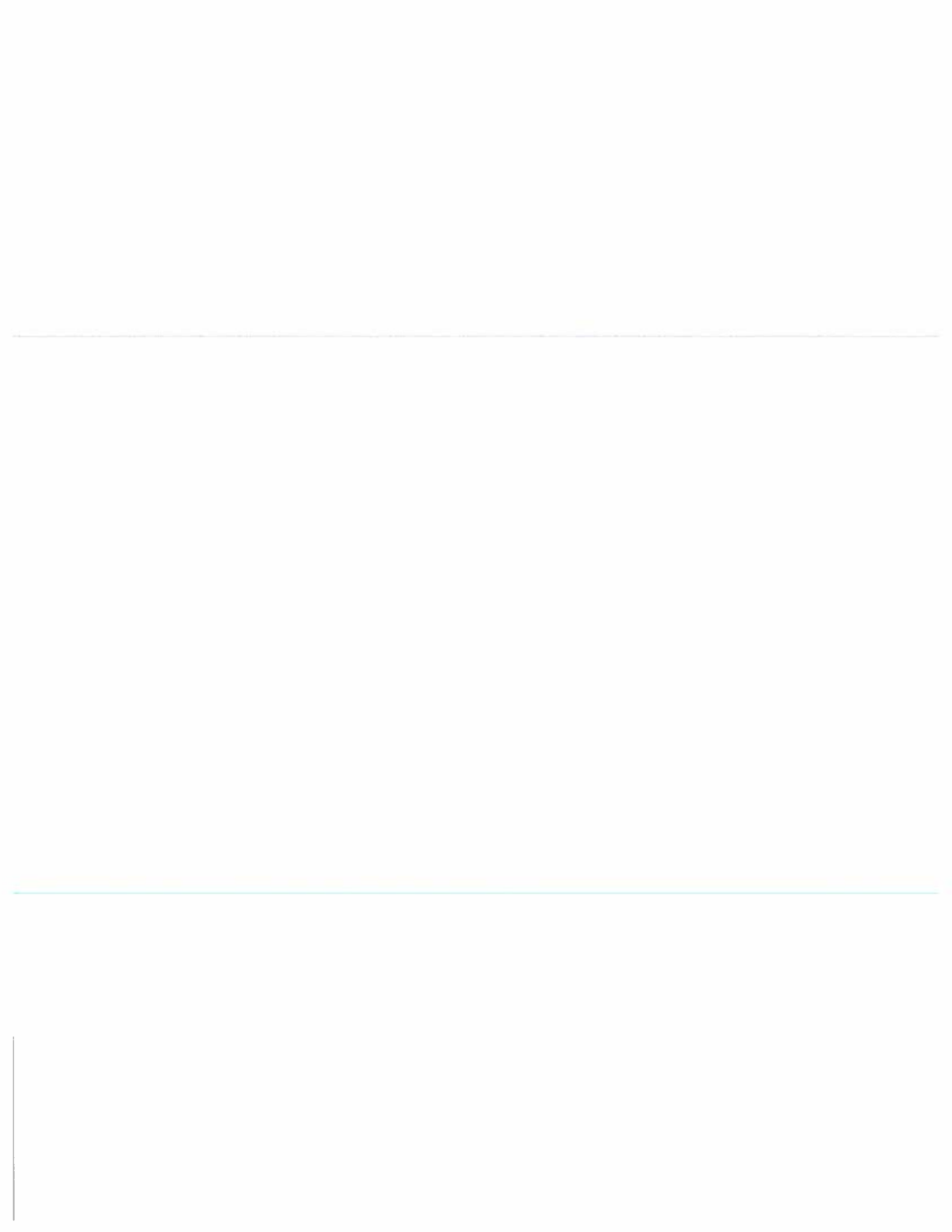
If you would like to learn more information about this retreat, I will be holding a meeting after school on Thursday, September 7th, 2017 at 3:00pm in the guidance office. If you are unable to attend and have any questions, feel free to contact me at 519-578-8330 x 5652.

Regards,



J. Carmichael

Student Leadership Teacher





OFF-CAMPUS MEDICAL INFORMATION AND CONSENT

(For Category II or III Trips)

PERMISSION

I hereby grant permission for my son/daughter _____
to participate in the off-campus trip to (City/Town/Province/State) Hidden Acres Mennonite and Retreat C

leaving the school on (date) Monday, September 10, 2018
and returning to the school on (date) Tuesday, September 11, 2018

PERSONAL INFORMATION

Parent/Guardian _____
Home Telephone _____
Home Address _____
Business Name and _____
Telephone Number _____
Emergency Contact _____ Telephone _____
_____ Telephone _____

MEDICAL INFORMATION

Medical Problems (Allergies, etc.) _____

Medication (Directions for use, storage, etc.) _____

Family Doctor: _____ Telephone: _____

*For out of province off-campus, additional health coverage (insurance) is required.

Provider Company Name: _____

Policy Number: _____

Procedure in case of emergency _____

COMMITMENT

In consideration of _____ being permitted to participate on this
(Student's Name)
trip, I hereby agree to accept and pay all costs including transportation and other expenses incurred for the return
of my child from the site of the off-campus trip stated in (Permission) for medical reasons or inappropriate
behaviour.

Signature of Parent/Guardian/Adult Student _____ Date _____

Document Management: Home School
Retention: Non OSR School File – Current Year

CODE OF CONDUCT
CAMERON HEIGHTS COLLEGIATE INSTITUTE
SAC RETREAT – HIDDEN ACRES

STUDENT _____

While on an off campus excursion, the expectations around student behaviour are the same as they would be if the student were in a classroom. We also want to remind students that all are expected to abide by the Board's zero-tolerance policy regarding alcohol consumption, illegal drugs, weapons and violence.

PARENTS: Please note that any student guilty of serious inappropriate behaviour, or who fails to abide by the expectations listed below **MAY BE SENT HOME AT HIS/HER OWN EXPENSE**

1. Students are expected to participate in all organized and scheduled events.
2. Students will strictly adhere to all meeting and departure times.
3. Students will behave in a courteous, considerate and respectful manner towards all individuals while on the trip.
4. Smoking is not permitted in retreat rooms, on buses, or at any time.
5. No alcoholic beverages or drugs will be transported, purchased, or consumed at any time
6. Students will be under the direct supervision of a teacher at all times.
7. Students will respect the curfew set by staff and will not leave the retreat premises at any time. Students will remain in their assigned rooms creating no noise after the designated hour.

I HAVE READ THE ABOVE CAREFULLY AND AGREE TO ABIDE BY THE STATED RULES.

(Signature of Student)

I HAVE READ THE ABOVE CAREFULLY AND I AM AWARE OF AND UNDERSTAND THE EXPECTATIONS OF MY SON/DAUGHTER DURING THE THIS TRIP. I AM ALSO AWARE OF THE CONSEQUENCES FOR SERIOUS VIOLATIONS OF THESE EXPECTATIONS AS STATED IN THE BOX ABOVE.

(Signature of Parent/Guardian)

**FIELD TRIP/EXCURSION INFORMATION FOR
PARENT/GUARDIAN/ADULT STUDENT**

IS-04-F-1

To be completed by the teacher in charge and kept by the parent/guardian/adult student.

School: Cameron Heights Collegiate Institute
 Principal: Mr. Teed School Phone: (519) 578 8330
 Teacher Name: SAC Teacher(s): Carmichael, Kitzman, Leung, Weachle
 Destination: Hidden Acres Mennonite Camp, New Hamburg
 Learning Expectations for the Trip: Team building and event planning.

Departure Date: September 10th, 2018 Time: 10:50am
 Return Date: September 11th, 2018 Time: 10:50am
 Type of Transportation: Bus Cost of Excursion: _____

Name, Address, and Telephone Number of Travel Agency or other Outside Organization (if applicable): _____
 Specific Activities of the Excursion: _____

This is identified as a Higher Risk Activity Yes No
 High Risk Activities are:

- | | | | |
|---------------------------------------|--|--|----------------------------------|
| <input type="checkbox"/> Canoeing | <input type="checkbox"/> Jumping | <input type="checkbox"/> Sailing | <input type="checkbox"/> Cycling |
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Rock Climbing | <input type="checkbox"/> Nordic Skiing | |
| <input type="checkbox"/> Snowboarding | <input type="checkbox"/> Other | <input type="checkbox"/> Alpine Skiing | |

Special Information (e.g., clothing, materials, lunch): _____

Teacher in Charge: Mrs Carmichael
 Volunteers Needed Yes No
 If Yes For Supervision on the Excursion.
 For Driving.



FIELD TRIP CONSENT FORM

IS-10-F-2

Name of School: CHCI
 Name of Student: _____
 Name of Activity: Hidden Acres Retreat, New Hamburg
 Date of Activity: Mon, Sept 10-11, 2018

This form must be read in its entirety and signed by a parent/guardian of a participating student or the participating student if the student is age 18 and over.

ELEMENTS OF RISK

Educational activity programs such as the one named above involve certain elements of risk. Accidents may occur while participating in these activities. These accidents may cause injury. These accidents result from the nature of the activity and can occur without any fault on either the part of the student, or the School Board or its employees or agents, or the facility where the activity is taking place. By choosing to participate in the activity, you are assuming the risk of an accident occurring.

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

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.)

If you choose to participate, you must understand that you bear the responsibility for any accident that might occur.

The Waterloo Region District School Board does not provide any accidental death, disability, dismemberment or medical expenses insurance on behalf of the students participating in this activity. Please be advised that buses and other forms of public transportation may use video surveillance equipment.

NOTE: If volunteers are required, please check if you are able to assist _____ students

I can supervise on the excursion _____ I can drive _____ students
 If volunteer drivers are used, I give permission for my son/daughter to travel with a responsible volunteer driver _____ (please check)

I have read and understand the information on the Field Trip/Excursion Information for Parent Form (IS-04-F-1).

Student Signature (if student age 18 and over): _____ Date: _____
 Parent/Guardian Signature (if student under age 18): _____ Date: _____

Home School: Kildonan Home School: Kildonan
 Home School: St. Ursula School (ex - Central Year) Home School: St. Ursula School (ex - Central Year)

Administration of Prescription Medication during the Excursion Act R.S.O. 1990 c. 2 and The Education Act R.S.O. 1990 c. 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

