



# DOON PUBLIC SCHOOL

1401 Doon Village Road, Kitchener, Ontario N2P 1A8

Telephone: 519 748-1341 Fax: 519 748-1342

Thursday, May 28, 2015

Dear Parent(s)/Guardian(s),

As the time for our graduation ceremony approaches, we are working to plan the rehearsal for the grade eight classes. On Thursday, June 25, 2014, from 10:00 am to 11:15 am, the grade eights will be walking through the ceremony and giving of diplomas. We will be leaving Doon by bus at 10:00 am and boarding buses to return to Doon around 11:15 am. Please complete the attached permission form and return by Friday, June 12. **Note: Students will be dismissed from Doon ONLY. They may not walk home from Huron or have alternate arrangements following the rehearsal at Huron Heights.**

In addition, we are looking for volunteers. After the graduation ceremony, all of the rented chairs in the Huron Heights gymnasium must be stacked. If there is a high school student in your family who would like to earn volunteer hours, please have them fill out and return the slip at the bottom of this page by Friday, June 12. **Note: Students need to bring their volunteer hour tracking page with them that evening to be signed.**

Sincerely,

Doon Grad Committee

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I am interested in earning volunteer hours!

Name: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

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

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

School: Doon Public School

Principal: Don Oberle School Phone: 519-748-1341

Grade/Class/Course: 8 Teacher(s): Mme Trautrim, Mr Gimple

Destination: Huron Heights

Learning Expectations for the Trip: To practice routines for graduation night

Departure Date: Thursday June 25, 2015 Time: 10:00

Return Date: Thursday June 25, 2015 Time: 11:15

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: To practice routines for graduation night

This is Identified as a Higher Risk Activity:  Yes  No

High Risk Activities are:

- |                                       |                                        |                                        |                                        |
|---------------------------------------|----------------------------------------|----------------------------------------|----------------------------------------|
| <input type="checkbox"/> Canoeing     | <input type="checkbox"/> Camping       | <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"/> Alpine Skiing |
| <input type="checkbox"/> Snowboarding | <input type="checkbox"/> Other _____   |                                        |                                        |

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

Teacher in Charge: Mme Trautrim

Volunteers Needed  Yes  No

If Yes  For Supervision on the Excursion.

For Driving.



Waterloo Region  
District School Board

## FIELD TRIP CONSENT FORM

Name of School: Deer Public School

Name of Activity: Graduation Rehearsal

Date of Activity: Thursday June 25, 2015

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.

\_\_\_\_\_ I can supervise on the excursion. \_\_\_\_\_ I can drive \_\_\_\_\_ students.  
number

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 Name: \_\_\_\_\_

\_\_\_\_\_  
Student Signature (if student age 18 and over) Date

\_\_\_\_\_  
Parent/Guardian Signature (if student under age 18) Date

Document Management:  
Home School

Retention:  
Non OSR School File – Current Year

Authorization for the collection of this information is the education Act R.S.O., 1990, c.E.2 and the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purposes of the education of students. Questions about the collection of this personal information should be directed to the Freedom of Information, Privacy and Records Information Management Officer, Waterloo Region District School Board.