**Waterloo Region
District School Board**

FIELD TRIP CONSENT FORM

Name of School: _____

Name of Student: _____

Name of Activity: _____

Date of Activity: _____

This form must be read in its entirety and signed by a parent/guardian of a participating student <u>or</u> 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 Signature (if student age 18 and over)   Date

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

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