


**SD #73
LOWER RISK FIELD TRIP
INFORMATION & CONSENT FORM**

Principal's approval: 
Please return before: Sept.20, 2021

Activity: Neighbourhood Walk Teacher: All
Location: Surrounding Areas of the School Date: September 2021 – June 2022
Time (s): Anytime During School Hours Arrival back at school: 2:30 pm

Overview Itinerary for the Field Program: Walks include: library, lake area, public playground, fire hall and school perimeter etc.

Transportation: Walking to and from activity Transported by school bus
 Driven in private vehicles Drivers required

Parent Helpers Required: Yes No Sometimes Lunch Required: Yes No Sometimes

Fee to be Paid: Yes No

***This permission form must be returned for your child's participation, written notes or phone calls are not acceptable.**

PERMISSION SLIP

I have read and am informed about the proposed field trip for Neighbourhood Walks for various dates of the 2021-2022 school year.

I request that my child _____ (print child's name) be able to participate in this field trip.

I, the undersigned parent or guardian of the above named student, request that my son/daughter be allowed to participate in the event described above. Both my son/daughter and I understand that the Kamloops/Thompson District Student *Code of Conduct* applies on all field trips. The use of alcohol or drugs and or inappropriate student conduct may result in suspension from school. Students engaging in these behaviours are liable to be sent home at their families expense.

Note and medical conditions or medications the staff or supervisors should be aware of: _____

Please supply the school with: Family Physician, Care Card Number and Emergency Numbers if they are not already on file.

Student Name: _____ Parent/Guardian Signature: _____

Phone : _____ Cell: _____

Teacher/Office Use Only

Fee for Field Trip Received: Yes No Amount: _____ Initials: _____