

School District #73 (Kamloops/Thompson)
LOWER RISK FIELD TRIP
INFORMATION & CONSENT FORM

(Principal's approval: DR)
(Please return by: Oct-19)

Program Information

Activity: Health Literacy Forum (grade 6) **Teacher(s):** Mr. Ngo, Mrs. Ray, Mr. Bell **Location:** TCC

Date: Wednesday, October 25, 2023

Time(s): 9:15am - 1:45pm **Dismissal:** Regular dismissal

Overview Itinerary for the Field Trip:

The health literacy forum is an exciting day of learning where students will have an opportunity to engage in a variety of fun, interactive activities aligned to the BC Curriculum. This year's keynote speaker features local health advocate & registered nurse Kasha Mitton and will focus on personal empowerment, connection to self and others, and wellbeing.

- Students will be transported by bus to and from the Tournament Capital Centre on October 25th, 2023
- Students will participate in learning activities related to mental health (ie. practices that are good for our mental health, physical health, and both; positive coping strategies; strategies for seeking help/support for self and others;
- A healthy snack will be provided by sponsoring partner Save-on Foods, however **students must bring their own bagged lunch and water bottle (water only)**
- Students should come dressed and prepared to be active, appropriate footwear is recommended.

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

I request that my child _____ 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 Board Policy #240 "Student Behaviour -- Discipline" 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.

Participant Information

Child's Legal LAST Name: _____ First name: _____ Grade: _____

Allergies or Dietary Restrictions: _____

List any medical conditions or medications the child is taking: _____

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

Contact Information

Guardian Name: _____ Primary Phone: _____ : Secondary Phone: _____

Guardian Name: _____ Primary Phone: _____ : Secondary Phone: _____

Emergency Contact: _____ Phone: _____ Relationship to the child: _____

Parent/Guardian Signature: _____

Custody Info: _____

Emergency Authorization and Pick Up Information



Emergency Authorization:

In the unlikely event that the participant named above is injured or becomes seriously ill while with this program, and I cannot be reached, I authorize the staff to seek and authorize any and all hospitalization, medical, dental, and/or surgical treatment deemed advisable by the circumstances. While every reasonable precaution is taken with this program, it is agreed that the providers and staff and volunteers are released from all liability for injury to the above named participant or for loss or damage to personal property.

Signature of Guardian:

Date: _____

Please note that without a guardian signature, your child cannot be admitted into this program



Pick Up Information:

Please check one of the following:

I will allow my child to **walk home** at the end of each program day (for children grades 4 – 7 or family groups only)

OR

I or a designated adult will **pick up** my child at the end of the program. Please list names and contact numbers for designated adults who have permission to pick up your child:

Signature of Guardian:

Date: _____

Your child will NOT be released to anyone not listed above without prior written or verbal consent

Parental Consent Form - Media Release

Student Name: _____ Grade: _____

In accordance with the Freedom of Information and Protection of Privacy Act, School district #73 (Kamloops-Thompson) requires consent to use personal information for purposes unrelated to the education programs.

1. It is tradition in our School District to allow school staff, district staff and the media to photograph or videotape individual students and groups of students to commemorate events and to promote various educational, sports and are not required for educational purposes. As such, consent for the release of your child's name, photograph and comments is required. Student's names, photographs and comments may be published in the school newsletter, and on occasions, in the School District Calendar, annual report or in the news media.

- Yes, I give my consent** for publication of my child's name, photograph, and comments for purposes consistent with the above.
- No, I do not permit** the publication of my child's name, photograph, and comments for the purposes consistent with the above.