



Parent Informed Consent Form (High Risk Activity)

This form must be read, each paragraph initialed where appropriate and signed at the bottom by a parent or legal guardian.

Ecole Cedardale is arranging for snowshoeing and tubing for students in Grade 4/5 at Cypress Mountain on **Friday February 9th, 2024.**

Students will need to arrive at school at 8:30 am and will be travelling by bus. The bus will be leaving promptly at 8:45 am and late arrivals cannot be accommodated. Students will be supervised by their classroom teachers, Cypress staff while snowshoeing, and caregiver chaperones. Students will be returning to school for 3:00 pm dismissal.

Accidents may occur while participating in these activities and these accidents may cause personal injury, illness, death or property damage or loss. The dangers and risks may include, but are not limited to:

Risk	Injury
Bus Transportation	Vehicular Accident Injury
Snowshoeing	Injuries related to snowshoeing (bumping into others, falling, tripping on ice, etc.)
Tubing	Head injury, colliding with a fixed object, falling off of tube and incurring injury, frostbite and/or hypothermia if not dressed appropriately for the weather

The cost of this winter activities is \$85.00, payable via School Cash Online.

Students are asked to dress appropriately and comfortably for the weather: warm clothing, snow pants, gloves, warm jacket, warm socks, snow boots, waterproof shell (if necessary) etc.

This activity is part of the Physical and Health Curriculum and is part of Cedardale’s Winter Activity focus.

If you do not wish your child to accompany their class on this trip, please return this form with the “will not be participating” box checked off and contact your child’s teacher who will arrange alternate supervision. **If alternate financial arrangements would be helpful for your child’s participation, please contact Mme Hayes at khayes@wvschools.ca.**

Please ensure that you complete and return pages 2 & 3. Please make sure to retain page 1 for your records.

Parent/Guardian to fill out

In consideration of the West Vancouver School District offering my child, _____, an opportunity to participate in snowshoeing and tubing at Cypress Mountain on February 9th, 2024, I waive any and all claims I may have against, and release from all liability and agree not to sue the Board of Education of School District 45 (West Vancouver) and its officers, employees, agents, volunteers and representatives, and the Ministry of Education for any personal injury, death, property damage or loss sustained as a result of my child's participation in the skating lessons field-trip, arising out of any cause whatsoever.

My child may not necessarily be supervised by an adult at all times: _____ Initial

My child has no illnesses, allergies or disabilities that may require special attention, except as described as follows:

_____ Initial

I am aware that I should contact the school for further information if I am unaware what clothing and equipment is required for this activity or possible weather conditions. I understand that it is our responsibility to ensure my child has all necessary equipment and clothing.

_____ Initial

I understand that the school's Code of Conduct applies during this field trip. Specifically, no drinking of alcoholic beverages, use of tobacco products at any time or consumption of drugs for any reason other than approved medical purposes with prior consent given on your medical form. I will be responsible for any costs caused by my child's failure to abide by the Code of Conduct, including any costs to send my child home. Students are subject to the Student Code of Conduct (AP350) and their School's Code of Conduct during this field trip.

_____ Initial

By choosing to allow my child to participate in this activity, I will assume the risk of an accident occurring and agree that this activity as described is suitable for my child.

_____ Initial

The Board of Education of School District 45 (West Vancouver) does not provide any accidental disability, dismemberment, medical expense or death insurance on behalf of participating students. The School District recommends that you check your family medical coverage or purchase the Student Accident Insurance which was made available at the beginning of the school year.

_____ Initial

In signing this Consent and Waiver, I am not relying on any oral / written representation or statement by The Board of Education of School District 45 (West Vancouver) and its officers, agents, employees, or authorized volunteers, or the Ministry of Education, to prompt me to permit my child to take the trip, other than those set out in this Consent and Waiver.

_____ Initial

Parent/Guardian to fill out

I give _____ (name of student) permission to participate in snowshoeing and tubing at Cypress Mountain on Friday, February 9th, 2024

I have paid on School Cash Online. Receipt No. _____

OR

I do not wish for my child _____ (name) to accompany their class on this trip.

Caregiver printed name:

Caregiver signature:

DATE:

I am available to volunteer to supervise on Friday, February 9th (Your child's classroom teacher will confirm with you.)

Caregiver printed name:

Caregiver signature:

Email:
