

## **AP 308-5**

## Field Trip Consent and Waiver Form for Participation in a Higher Risk Activity

(*Parent/Legal Guardian, please initial you have read each paragraph in the space provided.)
Dear Parent/Legal Guardian:
In consideration of Abbotsford School District offering my child,
(name)
an opportunity to participate in a field trip <u>between December and March in the current school year</u> . I waive any and <i>(date)</i>
all claims I may have against, and release all liability and agree not to sue the Board of Education of School District No.
34 (Abbotsford) 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 field trip,
arising out of any cause whatsoever.
I hereby give my consent, and acknowledge by my signature that students will be going to:
Thereby give my consent, and acknowledge by my signature that students will be going to.
Whistler Black Comb, Hemlock or other ski areas within British Columbia, and will be away from the school from
(location)
between December and March in the current school year, from 6am – 8pm
(date/time)
They will be traveling by (school bus/public transport/private vehicle).
Initial*
<u>Description of Field Trip and Relevant Information</u> : (Description of the activity; necessary skills/ competencies; training
and safety equipment required).
Ski / Snowboard
Activity appreciate attire: ski pants, jacket, gloves, scarf, etc. / Wearing helmet is mandatory
y upp 12 miles and parties, jacobas, gravitas, activity of an indication of an indication y
Ski / Snowboard equipment: rental available
Initial*

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Students will be with qualified instructors at all times during activity	
	Initial*
My child has no illnesses, allergies or disabilities that would preclude him/her from nere:	participating, except as described
	Initial*
am aware of the usual risks and dangers inherent in participation in all of the active the possibility of personal injury, death, property damage or loss resulting from the may include, but are not limited to:	•
L. Sprains, Bruises	
2. <u>Concussions</u>	
2. Concussions  3. Broken bones	
2. Concussions 3. Broken bones	Initial*
2. Concussions  3. Broken bones	

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·	of Conduct applies during this field trip. I will be responsible for any Code of Conduct, including any costs to send my child home.
I also agree to follow all rules and regulations of t	the competent professional and/or site rules and regulationsInitial*
the student, or the Board of Education or its em	activity and can occur with or without any fault on either the part of ployees or agents, or the facility where the activity is taking place. his activity, I am accepting the risk of an accident occurring, and litable for my child.
Board of Education and its servants, agents, empl	ng on any oral or written representation or statements made by the loyees, or authorized volunteers, or the Ministry of Education, to ner than those set out in this Consent and Waiver.
I am 19 years of age or older and have read and u it is binding upon me, my heirs, executors and ad	understand the terms of this Consent and Waiver, and understand tha ministrators. Initial*
Signature of Parent/Legal Guardian	Signature of Witness
Name of Parent/Legal Guardian (please print)	Name of Witness (please print)
Address	Address

NOTE: When an International student requires an authorized signature for a field trip, the supervisor should contact the International Student Program office for direction.