



PARENTAL CONSENT FORM

GRADE/CLASS: Gr. 9 to 12 Portage on Purpose

TEACHER-IN-CHARGE: Mr. B. Ferguson

Please read the contents of this Consent and Acknowledgement of Risk form. Clarify any questions or concerns with the teacher/leader BEFORE signing it.

This form must be signed and returned to the school with the application package.

PROGRAM/ACTIVITY INFORMATION

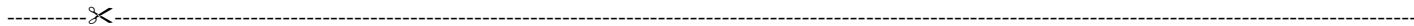
<u>DESTINATION</u>	<u>DATE(S)</u>	<u>DEPARTURE TIME</u>	<u>RETURN TIME</u>
Various locations in Portage & area	2 nd Wed. Monthly	12:50 p.m.	3:15 p.m.

ITINERARY:

- On site at location for Portage on Purpose from 1:00 to 3:00

COST TO THE STUDENT: N/A

STUDENTS PREPARATION/INSTRUCTIONS: N/A



CONSENT

(Name of Student) _____ has my permission to participate in the SY Portage on Purpose every 2nd Wed. of the Month.

Parent volunteers are needed for this event each month to drive and stay with students at their chosen location to serve. However, all volunteers must have the necessary paperwork for volunteering on file with us.

Yes, I would like to volunteer for this event

I would like information on the process for volunteering in the school

Medications that my child needs during this activity: _____

I have read and acknowledge the guidelines on the reverse.

Date: _____ Name (Please print): _____

Signature: _____



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The board will make every reasonable effort to ensure or ascertain that:

- a. The staff, volunteers and/or service providers involved are suitably trained and qualified.
- b. The students are adequately supervised over all aspects of the program/activity.
- c. The location(s) used are appropriate and safe for the activity(ies) and group.
- d. Equipment used has been inspected and deemed appropriate and safe.
- e. A safety plan is in place to identify and manage known potential risks.
- f. An emergency plan is in place to deal with an injury or illness to one of the students.

1. I acknowledge my right to obtain as much information as I require about this program or activity and associated risks and hazards, including information beyond that provided to me by the school or board.
2. I freely and voluntarily assume the risks/hazards inherent in the program/activity and understand and acknowledge that my child may suffer personal and potentially serious injury due to an unforeseeable event associated with his/her participation.
3. My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service provider's administrators, instructors, and supervisors over all phases of the program/activity.
4. In the event my child fails to abide by these rules and regulations, disciplinary action may require his/her exclusion from further participation, or that I be contacted to have him/her picked up, unless I have specified other transport arrangements.
5. I acknowledge that it is my responsibility to advise the teacher-in-charge of any current medical and/or health concerns of my child that may affect his/her participation in the stated program or activity.
6. I consent that the board, through its employees, agents and officers may secure such medical advice and services as they deem necessary for my child's health and safety, and that I shall be financially responsible for such advice and services.