



NOTRE DAME ACADEMY

Gr 7 Field Trip Consent and Information Form

In our classrooms this year we would like to enrich our student's learning experience by going on an excursion(s) that will take us off of the school property. In order to do this we need your permission allowing your child to participate. Below is a list of trips that we plan to take and some important information. Additional information may be communicated by the teacher before the field trip occurs.

******* ALL STUDENTS REGISTERING FOR NOTRE DAME ACADEMY MUST COMPLETE AND RETURN THIS FORM. *******
Please complete the back and place your signature at the bottom.

Student Name: _____

Grade: _____

| Activity | Field Trip Location | Date and schedule | Educational Connection | Potential Risk of Injury | Additional items needed | Travel Arrangements | Additional Costs to parents |
|---|---|------------------------------------|---|--|--|-------------------------------|---|
| Consent for General School Activities – Grades 6 - 9 | | | | | | | |
| Mass Celebrations/Faith Formation Activities | Holy Family Parish St. Patrick's Church | Ongoing throughout the year | Catholic Faith Formation and Education Mass, Celebrations, and Faith Formation Activities | Trip, fall, sprains, traffic/pedestrian accidents | Dress Appropriately for walking and weather | Walking or bus transportation | None |
| Bowling | Panorama Lanes | Dates TBA | Physical Education | Sprained/broken toe, foot, ankle, knee, wrist, finger or shoulder. Concussion, slip on lane | None | Bus Transportation | None |
| Swimming | Echodale or City of Medicine Hat Facility | Dates - TBA | Physical Education | Slip on wet surfaces, drowning, traffic/pedestrian accident | Towel, swim wear Parents may decide to provide life jackets | Bus Transportation | None unless teacher organizes additional swim times outside of Kinsmen Schedule |
| Tobogganing | Southridge Hill | Dates – TBA | Physical Education | Slip on sidewalks, ice, hill terrain may cause sprained/broken ankle, knee, wrist, fingers or shoulder. Possible concussion. | Helmets and proper winter attire. | Walk or Bus Transportation | None |
| Skating | City of Medicine Hat Facility | Dates – TBA | Physical Education | Slip on ice or uneven ground which may cause a sprained/broken ankle, knee, wrist, fingers or shoulders, scrapes, cuts, and/or concussion. | Skates (if hockey or ringette is incorporated, regular equipment is mandatory) | Bus Transportation or walking | None |
| Fine Arts Performances | Monsignor McCoy Esplanade, MH College Local Theatre Facilities | Dates - TBA | Drama and Music areas of the Fine Arts curriculum | Trip, fall, sprains, traffic/pedestrian accidents | None | Walking or bus transportation | None |
| NDA Track and Field | Crescent Heights High School | Dates – TBA | Physical Education | Trip, fall, sprains, broken bones, burns, cuts, slipping, traffic/ pedestrian accidents | PE Clothing | Bus Transportation | None |
| NDA Blue/Gold Day | MH Cypress Centre, FLC | Dates – TBA | Opening Activity | Trip, fall, sprains, broken bones, burns, cuts, slipping, traffic/ pedestrian accidents, risks associated with swimming & skating | None | Bus Transportation | None |
| DPA Walk/City Walks | Excursions within close proximity of school property or other planned activities within city boundaries | Ongoing throughout the school year | Daily Physical Activity requirements | Falls/accidents associated with playground equipment, trip, fall, traffic/pedestrian accident | None | Walking | None |
| NDA Option Program/Rec Ed Outdoor Activities | Excursions within close proximity of school property, Police Point Park | Ongoing throughout the school year | Option Program | Trip, fall, sprains, broken bones, burns, drowning, cuts, slipping, traffic/ pedestrian accidents, | None | Bus and walking | None |

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|---------------------------------------|--|-------------------------------|--|---|---|---------------------|--|
| Grade 7 Activities | | | | | | | |
| Solar Farm, Power Plant and Wind Farm | Solar Farm Power Plant Wind Farm | Dates – TBA | Science 7 – Environmental Education | Trip, fall, sprains, broken bones, burns, cuts, slipping, traffic/ pedestrian accidents | Shoes and pants (no flip flops or shorts) | Bus and walking | None |
| Dinner and Movie | Medicine Hat Mall and Cineplex | End of Year – June | Film study Culinary arts | Trip, fall, food poison, traffic/ pedestrian accident (in parking lot), lost in mall, abduction | | Bus transportation | Money for food court, minimal cost to cover expenses |
| Community Clean Up | Southridge area by NDA | Ongoing – throughout the year | Science – Environmental Service project – Religion | Trip, fall, sprains, insect bites, scrapes, bruises, vehicle accident, pedestrian accidents | Gloves, garbage bags | Walking | None |
| Snow shoveling | Southridge area (community) | November to February | Service project – Religion 7 | Trip, fall, sprains, broken bones, frost bite, pedestrian accident, slipping | Winter dress (gloves, head gear) | Walking | None |
| Prairie Gleamers | Prairie Gleamers | Dates – TBA | Service Project – Religion 7 | Trip, fall, sprains, cuts, traffic/pedestrian accident | None | Bus transportation | None |
| Book Buddies | Southridge Park | Dates – TBA | Service Project – Religion 7 | Trip, fall, sprains, broken bones, bites, stings, pedestrian accident | Blankets | Walk | None |

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

1. The staff, volunteers and/or service provided involved are suitably trained and qualified.
2. The students are adequately supervised over all aspects of the program activity.
3. The location(s) used are appropriate and safe for the activity(ies) and group.
4. Equipment used has been inspected and deemed appropriate and safe.
5. A Safety Plan is in place to identify and manage known potential risks.

CONSENT AND ACKNOWLEDGEMENT OF RISK

Destination/Activity/Program Date(s):

1. I accept the mode of transportation for this activity.
2. 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.
3. 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 arising from his/her participation.
4. My child has been informed they 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.
5. In the event my child fails to abide by these rules and regulations, disciplinary action may require my child's exclusion from further participation, or that I be contacted to have my child picked up, unless I have specified other transport arrangements.
6. I acknowledge that it is my responsibility to advise the Lead Teacher of any medical and/or health concerns of my child that may affect their participation in the stated program or activity.
7. I acknowledge that the trip supervisors may secure transport to emergency medical services

Please sign and return to the school

Child(s) name (please print) _____ Date: _____

Medical Concerns that need to be reminded or shared

I have read and consent to my child(s) participating in the field trips outlined for this school year. I am aware of any additional risks associated with each activity.

Parent's name (please print) : _____

Parent Signature: _____