



**Parent Memo Regarding Student Participation
in Alpine Skiing/Snowboarding**

Please read carefully before signing.

**Our School (_____) is planning an Alpine Skiing/
Snowboarding field trip that will require students to travel outside of
regular school hours. Participation is voluntary. We are requesting
your consent for your child to participate in this field trip.
The details are as follows:**

Date of Field Trip:	
Start time:	
Pick-up location for your child	
Drop off location for your child	
Lead Teacher:	
Number of Students on Trip:	
Number of Adults Supervising:	
Estimated Cost	
Estimated Return Time	
Transportation Details	
Accommodations Details	
Activities description	
Dress/Equipment Required	
Other Notes	

Element of Risk

Skiing and snowboarding are enjoyable sports that can enhance the Physical Education curriculum for students. However, they are also sports with physical demands and inherent risks. Accidents and injuries may occur when students are participating in these activities. These accidents result from the nature of the activity and can occur without any fault on either the part of the student, Nova Central School Board or its employees or agencies, or the facility where the event is taking place. By consenting to your child's participation in this activity, you are assuming the risk of an accident occurring.

Student Behaviour and Discipline

- **Student discipline and other school policies and procedures apply to school-sponsored field trips. Students are expected to abide by all of the rules of the ski club and to follow directions and instructions from the ski club staff. Students are also expected to abide by our school rules, to be considerate of others and to follow the instructions and directions of the teachers/parent chaperones.**
- **Students are expected to abide by the School Sport Code of Conduct and the Alpine Responsibility Code.**
- **Disciplinary action will be taken with any student who does not comply with rules and restrictions on school-sponsored field trips**
- **Any use of alcohol and illegal drugs will not be tolerated.**
- **Any student who behaves in a manner that is considered by the lead teacher to be a threat to safety, order and discipline may be removed from the ski hill.**

Travel Arrangements

Please note that we try to follow the travel schedule as outlined as closely as possible. However, from time to time unforeseen circumstances (eg. inclement weather) may prevent us from travelling when planned. In the event that students and chaperones need to stay for extra meals or an extra night's accommodations, parents/guardians will need to cover the extra cost for their child.

Emergencies

From time to time, emergencies can arise. PLEASE ENSURE THAT:

- **We have an emergency contact number for you/other designated person**
- **Your child carries their MCP Card with him/her**
- **Your child carries enough medication for the planned trip and an emergency, if he/she has a life-threatening allergy or illness that requires medication (eg. epi-pen; insulin).**



**Parent Consent Form for Student Participation
in Alpine Skiing/Snowboarding Field Trip**

I, being the parent/guardian of the student named below, have read the information provided with this form and agree with the terms and conditions as outlined for the Alpine Skiing/Snowboarding field trip.

- **I acknowledge that activities such as skiing and snowboarding may present various elements of risk. While care is taken to ensure that reasonable safety measures have been implemented, incidents related to such activities may occur and cause injury through no fault of the school or the facility where activities are being held. I acknowledge that I am responsible to assume these risks.**
- **I consent to my child participating in the field trip/ excursion, including the transportation and supervision arrangements as described and the terms and conditions outlined.**
- **I authorize the school to obtain routine or emergency diagnostic procedures and/or emergency medical treatment for my child as may be deemed medically necessary.**

STUDENT NAME:

(PLEASE PRINT)

NAME OF PARENT/GUARDIAN:

(PLEASE PRINT)

PARENT/GUARDIAN SIGNATURE:

PARENT/GUARDIAN EMERGENCY CONTACT #:

DATE: