

LORD TENNYSON ELEMENTARY SCHOOL
Parent/Guardian Field Studies Activity Consent Form
1936 West 10th Avenue, Vancouver, B.C. V6J 2B2
(tel) 604-713-5426 (fax) 604-713-5428

Teacher: M. Roch/Mme Kateryna

To the Parent(s)/Guardian(s) of: _____ Grade/Division: _____

The purpose of this form is to inform you about a proposed lunchtime activity (**organized outdoor soccer at Connaught Park, open to Grade 5 & 6 students**) involving your child, and to seek your support and permission for your child to participate. Parent Coaches Eric Rallison, Craig Hansen, and Lucy Creelman will begin offering a fun soccer program to interested Grade 5 & 6 students at Connaught Park over lunch recess on Wednesdays, beginning September 18th and continuing on Wednesdays through the school year. The end date is to be determined. Students will meet in the front of the school at noon, sign-in with the coaches and a school staff member, and walk together to/from Connaught Park. Short games will be setup on multiple small fields with approximately 4-8 players per team. Players will be moved through the fields as needed to ensure fun, fair and inclusive games. We will have a school staff member at the park as well, for supervision purposes. This opportunity is only for students who will be playing in the organized games (as opposed to other activities or spectators). Students will need to eat their lunch as they walk to the park. Students will be permitted to return to class shortly past the bell time, due to the distance of the park.

This is an important document. Please review the contents of this Consent and Acknowledgement of Risk form carefully prior to providing permission for your child to participate in this excursion. Clarify any questions or concerns with the Lead Teacher BEFORE signing it.

PROGRAM/ACTIVITY INFORMATION

DESTINATION/ACTIVITY: Organized Coached Soccer at Connaught Park DATE(S): Noon Hours on all Wednesdays from Sept 18th to June 26th, or when the program ceases, during the 2019-2020 school year

SERIES OF ACTIVITIES TO BE UNDERTAKEN (Specify program): Organized/Coached Soccer Games

PURPOSE OR EDUCATIONAL GOAL(S): physical activity, improving soccer skills

ITINERARY/ACTIVITIES: Students walk to Connaught Park and play soccer

METHOD OF TRANSPORTATION: walking

EDUCATOR-in-CHARGE: M Roch/Mme Kateryna McNicol

ACTIVITY SUPERVISORS PLANNED: Either M Roch, Mme Kateryna and/or supervision aide, PLUS parent coaches

COST TO THE STUDENT: nil WHAT TO BRING: appropriate footwear for a soccer game

OTHER CONSIDERATIONS: This activity is outside; BEHAVIOUR EXPECTATIONS: Students must follow Lord Tennyson Code of Conduct and RALE behaviour expectations at all times; students must participate in the soccer games.

SCHOOL RESPONSIBILITIES

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. A Safety Plan is in place to identify and manage known potential risks.
- e. An Emergency Plan is in place to deal with an injury or illness to any of the students.

POTENTIAL KNOWN RISKS AND SPECIAL SAFETY INFORMATION

Students will be walking to the park, including across Arbutus street; they are expected to observe pedestrian safety rules. Risk of tripping, slipping, or hit by a ball as with any game of soccer.

----- ✂ -----
See reverse or next page for Parent Consent portion of template, and return this to your child's teacher.

CONSENT AND ACKNOWLEDGEMENT OF RISK

LORD TENNYSON ELEMENTAY SCHOOL

DESTINATION/ACTIVITY: Organized Coached Soccer at Connaught Park DATE(S): Noon Hours on all Wednesdays from Sept 18th to June 26th, or when the program ceases, during the 2019-2020 school year

While school staff will take reasonable steps to prevent injuries to students, some degree of risk is inherent in the nature of this activity, and may occur without fault on the part of the student, school board, its employees or agents, or the facility where the activity is taking place. By allowing your child to participate in this activity, you are agreeing that the activity described above is suitable for your child, and that there is a risk of injury associated with the activity.

- 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 providers, administrators, instructors, and supervisors over all phases of the program/activity.
- 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.
- I acknowledge that the trip supervisors may secure transport to emergency medical services as they deem necessary for my child's immediate health and safety, and that I shall be financially responsible for such services.

I, _____(Name of parent/guardian) give permission for (Name of student) _____ to participate in the field study described above. I understand that my child may be exposed to a risk of injury due to accident while participating in this activity.

Date: _____ Name (Please print): _____ Signature: _____

Parent/Guardian Contact Numbers: Day _____ Evening _____

Comments (please include any restrictions or limitations which would prevent your child from fully participating in this trip, or any other special concerns which Board staff should be aware of surrounding your child.
