#  Mennonite Brethren Collegiate Institute



# APPENDIX A – Off-site activity(ies) consent of parent/guardian and acknowledgement of risk form.

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| To the Parent(s)/Guardian(s) of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Please read the contents of this Consent and Acknowledgement of Risk form. Clarify any questions or concerns with the teacher/leader BEFORE signing it.If this form is not signed and returned to the school by \_\_\_Sept 27, 2016\_\_\_\_\_, your child WILL NOT BE ALLOWED TO ATTEND. |
| PROGRAM/ACTIVITY INFORMATION |
| DESTINATION/ACTIVITY: \_\_\_\_\_**Edmonton (Harry Ainlay Tournament)\_\_** DATE(S): \_\_**Sept 27-Oct 2**\_\_\_ *OR*SERIES OF OFF-SITE ACTIVITIES (specify program): \_\_**See tournament draw and itinerary**\_\_\_\_\_\_\_\_\_\_\_PURPOSE OR EDUCATIONAL GOAL(S): \_\_\_\_**Development of the MBCI varsity volleyball program**\_\_ITINERARY/ACTIVITIES: \_\_\_\_\_**Provided to parents and administration**\_\_METHOD OF TRANSPORTATION: \_\_**Chartered Bus**\_\_\_\_ BY: \_\_\_\_**Exclusive Bus Lines**\_\_\_\_TEACHER-IN-CHARGE: \_\_\_**Brian Plett**\_ TOTAL NO. OF SUPERVISORS PLANNED: \_\_5\_\_\_SUPERVISORY ARRANGEMENTS: \_\_Devyn Plett, Josh Goossen, Michelle Froese, Sandy Malech\_\_\_\_\_COST TO THE STUDENT: **\_\_\_$500\_\_** WHAT TO BRING: \_\_\_\_**Uniforms, regular clothing, pillow and light blanket, cell phone, money for food and any miscellaneous purchases\_\_\_\_\_\_\_**OTHER CONSIDERATIONS: \_\_\_Students were told to make contact with their teachers about missed class work\_\_\_\_\_\_ |
| BOARD RESPONSIBILITES |
| The board will make every reasonable effort to ensure or ascertain that:* + - 1. The staff, volunteers and/or service providers 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.
			6. An Emergency Plan is in place to deal with an injury or illness to one of the students.
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| POTENTIAL KNOWN RISKS |
| Potential known risks include the following: **Bus accident, pedestrian accident, sickness, assaults, theft of personal items, sports injuries** |

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| CONSENT AND ACKNOWLEDGEMENT OF RISK |
| 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 board of any 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 advise 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.
7. Based on my understanding, acknowledgement, and consents as described herein,

(Name of Student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has my permission to participate in the (Destination/Program) \_**Harry Ainlay Volleyball Tournament, Edmonton, Sept 27-Oct 2**\_\_\_\_ field trip/activity.Date: \_\_**Sept 20, 2016\_\_\_\_\_** Name (*Please print*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |