

Parental Information / Permission / Consent / Waiver Form For Student Participating In Snow Activities

Name of Student _____ (my child)

		TRIP INFORMATION leted by school / trip organize	zer)	
Name of school:				
Participating Grade, Class	s or Club:			
Trip activity:				
Trip location:				
Date(s) of trip(s):				
Students will be away from	n the school from appro	oximately	to((times)
Drop-off / pick-up at		Drop no late	er than	·
They will be travelling by _			(i.e. school b	us).
On this field trip, approxim	nately (nun	nber) students will be partic	ipating.	
The students will be super employees while on the hi		mber) adults while on the b	us and by adults and/or	ski hill
On the hill, students will be as assessed by hill instruc		ccording to their skill level, a	s indicated by you on th	is form and/or
I understand that my chi		supervised at all times.		Parent Initial
Additional trip and/or su company provided to the p		: (including a list of any doo	cuments from the hill or	organizing
There will be charges fo	r the trip as follows:			
Transportation:	Lift fees:	Equipment rental:	Lesson:	
Helmet rental:	_ Wrist guard rental:	Other (ie: food):		
Please circle the charges Please make cheques pay		and enter the total here: \$ _		



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	PART 2 – STUDE			
Student's full name:	` .	•	- ,	
Student's date of birth (day/month/y	ear):			
BC Medical Care Card Number:				
My child has no illnesses, allergies, special attention, except as describe		needs (inclu	uding food requirements) that n	nay require
Emergency Contacts: TRY FIRST – Name & Relationship:				
Home phone:				
TRY SECOND – Name & Relations	hip:			_
Home phone:	Work phone:		Cell phone:	_
Equipment: I will supply the following circled or I			·	rist guards
Other:				
I require <u>rental</u> of the following circle Other:			·	et – wrist guards
Required if renting equipment – my	child's details are:			
Sex (circle): Male / Female				
Age: Height:		Weight: _		
Helmet size (circle): Adult / Child a	nd S/M/L/XL			
Shoe size: (circ	cle) Adult / Child			

Initial



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PART 3 – SKILL LEVEL AND ACTIVITY PERMISSIONS (To be completed by parent or guardian)			
I understand that participation in this trip is optional and if my child does not attend he/ she will be required to attend school and will be provided with other classroom activities.			
CIRCLE the appropriate activity and level of skill your child has in the chosen activity:			
Activity – downhill skiing, snowboarding, cross country skiing, other			
Beginner – no or limited previous experience, has never done this activity or has done once before			
Minimal skills - comfortable on easiest (green) runs, has done this activity more than twice but not often			
Intermediate skills - comfortable on more difficult (blue) runs, does this activity often and well			
Advance/Expert skills - able to be on advanced/challenging (black) runs, very experienced with this activity			
I understand that employees of the hill may or may not individually assess my child's experience level. I give permission for hill staff to do so and put my child in the skill class they deem appropriate.			
I understand that a lesson and/or skiing/snowboarding with a coach will be mandatory for my child.			
I am aware that advanced / expert level students are sometimes permitted to attempt tricks and jumps in terrain parks or on expert runs, and that these activities may pose a greater risk to these students, including the risk of spinal cord injury, brain injury or death.			
CIRCLE the appropriate response and initial:			
I <u>DO</u> / <u>DO NOT</u> GRANT PERMISSION FOR MY CHILD TO ATTEMPT EXPERT (Black Diamond) RUNS. I have discussed the risks inherent in these types of runs with my child and my child is aware that he/she <u>is</u> / <u>is not</u> permitted to participate in these activities. Furthermore, my child agrees. Initial			
I <u>DO</u> / <u>DO NOT</u> GRANT PERMISSION FOR MY CHILD TO ENTER A TERRAIN PARK. I have discussed the risks inherent in Terrain Parks with my child and my child is aware that he/she <u>is</u> / <u>is not</u> permitted to participate in Terrain Park activities. Furthermore, my child agrees. Initial			
I <u>DO</u> / <u>DO NOT</u> GRANT PERMISSION FOR MY CHILD TO ATTEMPT TO PERFORM JUMPS AND/OR TRICKS. I have discussed the risks inherent in these activities with my child, and my child is aware that he/she <u>is</u> / <u>is not</u>			

permitted to participate in these activities. Furthermore, my child agrees.

Initial



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Name of Student	(my child)
	ART 4 – CONSENT npleted by parent or guardian)
By signing this agreement I hereby give my confirm that:	onsent to allow my child to participate in this school trip and
My child has no illnesses, allergies or disabilities related or other reason why my child should not	that make this activity inappropriate for him/her. I know of no health participate in this trip Initial
eliminated, and that this activity has an inherent	p entails certain risks and dangers to my child which can not be risk of personal injury, including but not limited to: sprains, strains, injuries and death, and property and equipment damage or losses Initial
accidents occurring on the way to or from the hill unforeseen, inclement or intemperate weather; hars, lift chairs, gondolas, etc.); collisions with o equipment, and lift towers; poor grooming or desupervision; falls; injuries as a result of consumpthair lifts, t-bars, etc.; delays in obtaining medical	
responsibility for any inadequate clothing or equi	ipation in all activities associated with the field trip. I accept full pment which I provide. I am aware that I should contact the school clothing or equipment is required for the activities or the possible
My child and I are aware that my child must wea	r a helmet appropriate for the activity. Initial

My child and I are aware that my child must wear wrist guards if snowboarding.



Date:

snowboarding.

Student Signature

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PART 5 – WAIVER

(To be completed by parent or guardian)

I have read and understood all the information listed above and materials provided. I have discussed them with my child. My child and I understand the School's Code of Conduct and the Alpine Responsibility Code apply to this trip. I will be responsible for any costs associated with my child's attendance on the trip, including the cost of any equipment rented by my child and not returned, and any other costs which arise during the trip or are caused by or associated with my child's attendance on the trip, including any extra costs to send my child home.

Accidents are common. They can be the result of the nature of the activity and can occur with or without any fault on either the part of the student, or the school board or its employees or agents, or the facility where the activity is taking place. By allowing my child to participate in this activity, I am accepting the risk of an accident and injury occurring, including death, and agree that the activity is suitable for my child. In permitting my child to attend this trip, I am not relying on any oral or written representation or statements made by the School Board and its servants, agents, employees, or authorized volunteers, to induce me to permit my child to take the trip, other than those set out in this document.

PARENTAL/ GUARDIAN WAIVER OF LIABILITY: I agree that in consideration of School District No. 36 (Surrey) offering my child an opportunity to participate in the trip I waive any and all claims I may have, and release from all liability and agree not to sue the Board of Education of School District No. 36 (Surrey) and its officers, employees, agents, volunteers and representatives, for any personal injury, death, property damage or loss as a result of or arising from my child's participation in the trip, arising out of any cause whatsoever, including negligence. I understand that this waives my right to sue on my own behalf, not the right for myself or a guardian to sue on my child's behalf.

I am 19 years of age or more and have read and understand the terms of this document and understand that it is binding upon me, my heirs, executors & administrators.

Signature of Witness	Signature of Parent(s) / Guardian(s)
Printed Name of Witness	Printed Name of Parent(s) / Guardian(s)
Address	Address
NOTE: This form must be signe	d by ALL custodial parents or guardians of a child who is under the age of 19 years.
parent's expectations, the school agree to follow the instructions of	ENT: involved with this activity. I have discussed with my parents and understand my l's expectations and the hill's expectations for my behaviour while on the trip. I f teachers, supervisors and hill employees, abide by the school's code of conduct ring this trip. I agree to wear a helmet at all times. I agree to wear wrist guards while