

INFORMED CONSENT/PERMISSION FORM FOR EDUCATIONAL TRIPS
Form C – Elementary and Secondary Students Under 18 Years

ST. LAWRENCE _____ will make available the opportunity of participating in **BR Xpressions Concert** to its students on or about **Tuesday, March 31, 2015**.

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.

ELEMENTS OF RISK:

Educational activity programs, such as **Bussing**, involve certain elements of risk. Injuries may occur while travelling or participating in these activities. The risk of sustaining these types of injuries result from the nature of the activity and can occur without any fault of either the student, or the school board, its employees/agents or the facility where the activity is taking place. Refer to Ontario Physical and Health Education Association (OPHEA) website (www.ophea.net).

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity; i.e., listening attentively, etc.

If you choose to participate in the **trip to BR Xpressions Concert** on **Tuesday, March 31, 2015**, you must understand that you bear the responsibility for any injury that might occur.

The Hamilton-Wentworth Catholic District School Board does not provide accidental death, disability, dismemberment or medical expense insurance on behalf of the students participating in this activity.

ACKNOWLEDGEMENT AND PERMISSION:

WE HAVE READ THE ABOVE. WE UNDERSTAND THAT IN PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.

Signature of Student: _____ Date: _____

I give _____ permission to participate in the _____
(Name of Student) *(Description of Activity)*
to be held on or about _____.
(Date of Activity)

Signature of Parent / Guardian: _____ Date: _____