

**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 **Camp Marydale (Mount Hope, Ontario)** to its students on or about **Wednesday, April 29, 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 may 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](http://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 **Camp Marydale (Mount Hope, Ontario)** on **Wednesday, April 29, 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: \_\_\_\_\_