

This letter is to inform you that on _____ the _____
 (date) (class/club/sport team)

will be conducting a _____
 _____ . This activity will be carried out under the leadership of
 (activity)

_____. This activity has inherent risks which are beyond the control
 (teacher's name)
 of the James Bay Lowlands Secondary School Board. Situations such as _____

may occur and cause injury. Participants must assume the risks and dangers.

ADDITIONAL INFORMATION:

1. Destination of the trip: _____
2. Purpose of the trip (curricular relevance): _____
3. Place of Departure: _____
4. Departure time: _____ Time of return: _____
5. Staff supervisors: _____
6. Other volunteers: _____

DATE: _____

 Authorized Signature of Teacher or Principal

Please complete the bottom portion of this letter to signify that you have received this information and that you give your consent. Thank You!

 PARENTAL CONSENT

RE: Excursion to: _____

I have read this itinerary and am familiar with the nature of the trip that _____
 (name of child)

is proposing to take. To the best of my knowledge my child is physically and emotionally capable of making this trip and has my permission to do so.

 (Date) (Child's name) (Signature of Parent/Guardian)

PLEASE NOTE: The James Bay Lowlands Secondary School Board does not provide any accidental death, disability, dismemberment or medical expenses insurance on behalf of students participating in this activity. It is strongly recommended that you purchase Student Accident Insurance if you do not have your own private coverage.