



École Élémentaire Sunshine Hills Elementary
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CONSENT AND WAIVER FORM
 For Child participating in an Outdoor Education Experience
 at Mount Seymour, North Vancouver, BC

NOTE: This consent and waiver must be signed by ALL custodial parents or guardians of a child who is under the age of 19 years.

**Please return no later than Friday,
 December 8th, 2017**

In consideration of The Board of School Trustees of School District No. 37 (Delta) (the "School District") offering my child, _____, an opportunity to participate in a field trip for Grade 6 students on Thursday, January 18, 2018. I/We waive any and all claims I/We may have against, and release from all liability and agree not to sue, the School District or its trustees, officers, employees, agents, volunteers or representatives or the Ministry of Education for any personal injury, death, property damage or loss sustained as a result of or occurring during my/our child's participation in the field trip, providing the School District has not engaged in gross negligence or willful misconduct.

Commentary: It is the School District's intent that this Waiver and Consent Form provide parents with sufficient information about the fieldtrip to facilitate parents making an informed decision about the participation of their child in this activity. This Consent and Waiver Form is not asking parents to give up the right to sue if there has been gross negligence on the District's part. Nor can a parent give up the right of the child to sue.

Initials _____
Initials _____

I hereby give my consent, and acknowledge by my signature that:

Students will be going to Mount Seymour, in North Vancouver, BC on Thursday, January 18, 2018. Students will be away from the school from approximately 8:00 am until approximately 4:30 pm and Students will be travelling by chartered bus.

Initials _____
Initials _____

On this field trip, up to 70 students will be participating in Mount Seymour Field Trip.

Initials _____
Initials _____

The students will be supervised by 3 school district employees, Mount Seymour staff, and up to 5 parent volunteers.

Your child will not necessarily be supervised by an adult at all times.

Initials _____
Initials _____

My child has no illnesses, allergies or disabilities that may require special attention, except as described here:

Initials _____
Initials _____

I have completed and returned the Mount Seymour Medical form, which was included in this package.

Initials _____
Initials _____

I am aware of the usual risks and dangers inherent in participation in all of the activities associated with this trip, and of the possibility of personal injury, death, property damage or loss resulting from the activities. The dangers and risks may include, but are not limited to

1. Vehicle accident while traveling to and from the Mount Seymour
2. Unorthodox or high risk behaviors of your child or others during the activities
3. Program locations
4. Rugged terrain
5. Weather
6. Equipment breakages, failures
7. Conduct of the guide, chaperone or other group members
8. The possibility that your child may not heed safety instructions or restrictions given to the group.

Initials _____
Initials _____

I am aware that should my child be injured or become ill and require emergency evacuation any costs incurred shall be my responsibility.

Initials _____
Initials _____

I will ensure that my child is wearing full winter attire and snow boots, as required by Mount Seymour.

Initials _____
Initials _____

I will ensure my child is wearing **full winter attire: snow jacket, snow pants, snow boots, warm hat, and warm gloves/mittens**. Clothing that is appropriate for my child's participation in all activities associated with the field trip is mandatory.

Initials _____
Initials _____

I am aware my **child requires a helmet for tubing** and cannot participate without a helmet. Helmets are available from the mountain.

Initials _____ *Initials* _____
Initials _____

I am aware that I should contact the school for further information if I am unaware what type of clothing is required for the activities or possible weather conditions of this field trip. My child and I understand that it is our responsibility to ensure my child has all necessary clothing.

Initials _____
Initials _____

My child and I understand that the school and district Codes of Conduct apply during this field trip, as well as the Mount Seymour rules. I will be responsible for any costs caused by my child's failure to abide by these expectations, including any costs to send my child home.

Initials _____
Initials _____

Accidents 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 your son/daughter to participate in this activity, you are accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for your child.

Initials _____
Initials _____

In signing this Consent and Waiver, 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, or the Ministry of Education, to induce me to permit my child to take the trip, other than those set out in this Consent and Waiver.

Initials _____
Initials _____

Signatures required on next page

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

Date: _____

Parent/Guardian #1:

Signature of Parent/Guardian

Signature of Witness

Printed Name of Parent/Guardian

Printed Name of Witness

Address

Address

Date: _____

Parent/Guardian #2:

Signature of Parent/Guardian

Signature of Witness

Printed Name of Parent/Guardian

Printed Name of Witness

Address

Address

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