



**QUESNEL SCHOOL DISTRICT
ATTACHMENT 'C' – POLICY 445 –
OUT-OF-SCHOOL LEARNING EXPERIENCES**

OUT-OF-SCHOOL LEARNING EXPERIENCE - CONSENT FORM

We are arranging a sports trip/out-of-school learning experience for students in Grade _____
at _____ School on _____ (mm/dd/yy).

We will be going to _____ (location), and will be away from
the school from _____ to _____ (times). We will be travelling by
_____ (i.e. school bus, public transport, foot).

On this sports trip/out-of-school learning experience, we will be: _____

(describe activities – a field trip to a park might include hiking, walking, using climbing apparatus, eating lunch, etc.).

Students will need to bring:

The class will be supervised by an appropriate number of chaperones in accordance with School Board Policy.

If you do not wish your child to accompany their class on this trip, please contact
_____, who will arrange alternate supervision.

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.

The school district does not provide any accidental death, disability, dismemberment or medical expenses insurance on behalf of students.

I give _____ (name of student) permission to participate in the
out-of-school learning experience to _____ on _____
(mm/dd/yy). I understand that my child may be exposed to certain risks while participating in
this activity. Accidents and injuries may occur.

Signature of Parent/Guardian

Date

Printed name of Parent/Guardian

Address of Parent/Guardian