

FIELD TRIP/EXCURSION INFORMATION FOR PARENT/GUARDIAN/ADULT STUDENT

To be completed by the teacher in charge and kept by the parent/guardian/adult student.

School: Bridgeport

Principal: Mr. S. Sherlock School Phone: 519-743-4318

Grade/Class Course: Kindergarten Teacher(s): Beg, Hemmadi, Legge, Johnstone

Destination: Waterloo Region Museum

Learning Expectations for the Trip: Talk about events and experiences that reflect their own and others' heritage and cultural background (e.g., traditions).

Departure Date: Thursday, May 25 Time: 11:45 a.m.

Return Date: Thursday, May 25 Time: 2:40 p.m.

Type of Transportation: Bus Cost of Excursion: \$9.00 students

Name, Address, and Telephone Number of Travel Agency or other Outside Organization: (if applicable)

Waterloo Region Museum, 10 Huron Road, Kitchener, (519) 748-1914

Specific Activities of the Excursion: Explore village, see animals, feed chickens, play pioneer games, help with chores

This is identified as a Higher Risk Activity: Yes No

High Risk Activities are:

- | | | | |
|---------------------------------------|--|--|--|
| <input type="checkbox"/> Canoeing | <input type="checkbox"/> Camping | <input type="checkbox"/> Sailing | <input type="checkbox"/> Cycling |
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Rock Climbing | <input type="checkbox"/> Nordic Skiing | <input type="checkbox"/> Alpine Skiing |
| <input type="checkbox"/> Snowboarding | <input type="checkbox"/> Other _____ | | |

Special Information (e.g., clothing, materials, lunch): _____ As this is mostly outside, please dress for the weather... we will go rain or shine!

Teacher in Charge: Mr. Beg, Mrs. Hemmadi, Mrs. Legge, Mrs. Johnstone

Volunteers Needed Yes No

If Yes For Supervision on the Excursion.

For Driving, self to and from Museum.

Return this half with money by Tuesday, May 16

FIELD TRIP CONSENT FORM



Name of School: _____

Name of Activity: _____

Date of Activity: _____

Bridgeport

Waterloo Region Museum

Thursday, May 25

This form must be read in its entirety and signed by a parent/guardian of a participating student or the participating student if the student is age 18 and over.

ELEMENTS OF RISK

Educational activity programs such as the one named above involve certain elements of risk. Accidents may occur while participating in these activities. These accidents may cause injury. These accidents result from the nature of the activity and can occur 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 choosing to participate in the activity, you are assuming the risk of an accident occurring.

The chance of an accident occurring can be reduced by carefully following instructions at all times while engaged in the activity.

MEDICATION

If it will be necessary for your child to take prescription medication during the trip, the parent/guardian must complete the form Administration of Medication (IS-98-00). It must be forwarded to the Principal prior to the administration of medication. (If your child currently receives medication during the school day and a copy of this form is on file at the school, it is not necessary to complete another form.)

If you choose to participate you must understand that you bear the responsibility for any accident that might occur.

The Waterloo Region District School Board does not provide any accidental death, disability, dismemberment or medical expenses insurance on behalf of the students participating in this activity.

Please be advised that buses and other forms of public transportation may use video surveillance equipment. Parents and students should be aware that those attending this venue may take photographs or videos, which is beyond the control of the school or the Waterloo Region District School Board.

NOTE: If volunteers are required, please check if you are able to assist.

_____ I can supervise on the excursion.

I have read and understand the information on the Field Trip/Excursion Information for Parent Form (IS-04-F-1).

Student Name _____

Date _____

Parent/Guardian Signature (if student under age 18) _____

**I can you meet at the Waterloo Region Museum
(10 Huron Rd, Kitchener just off of Homer Watson Blvd.)**

Name (please print): _____

Phone Number: _____



Dear Parents,



On **Thursday, May 25** the students in Rooms 18 and 22 will be going to the Waterloo Region Museum. We will participate in a program called "Once Upon a Time" and will be kept busy going through a series of fun activities throughout the village where nursery rhymes are the theme. Students will see farm animals, feed the chickens, play pioneer games and help with household chores. We will leave the school at 11:45 a.m. and return at approximately 2:40 p.m.

The cost of the trip is \$9.00 per student to cover the cost of admission and bussing, adult volunteers are \$5.50 for admission. Please return the money and signed permission form no later than **Tuesday, May 16.**

Each class will need adults to supervise small groups of students during the trip. We do not have enough room on the bus for all adults so please indicate if you are able to drive and meet us there. Volunteers must have a current vulnerable sectors police check on file in the school office. **As this is a school trip, insurance does not allow for other family members (e.g., siblings) to attend.**



Waterloo Region
MUSEUM