
1080 Winslow Ave., Coquitlam, British Columbia V3J 0M6 • Phone 604-939-9201

SCHOOL DISTRICT NO. 43 (COQUITLAM)
**PARENT/GUARDIAN EXTRACURRICULAR FIELD TRIP INFORMATION AND
CONSENT FORM**

Dear Parents / Guardians

The purpose of this letter is to inform you about a proposed extracurricular field trip involving your child, and to seek your support and written permission for your child to participate. Please note that participation in this activity is **optional**.

While school staff will take reasonable steps to prevent injuries to students, some degree of risk is inherent in the nature of activities and may occur without fault on the part of the student, school board, its employees or agents, or the facility where the activity is taking place. By allowing your child to participate in this activity, you agree that the activity described above is suitable for your child, and that there is a risk of injury associated with the activity.

Teacher

Principal

Date of Field Trip: _____

Departure Time: _____ Anticipated Return Time: _____

Location of the Field Trip: _____

Nature of the Field Trip: _____

Students will need to bring: _____

Teacher(s)/Administrator(s) in Charge: _____

Your son/daughter will be traveling by: _____ School Owned Bus _____ Private Vehicle
_____ Rented Bus _____ Other (Specify)

Cost of Extra-Curricular Field Trip: _____

The cost includes (itemized list regarding transportation, entrance fees, etc.):

Known Risks and Safety Information:

☐ We require parent drivers for this trip. Please indicate on the return form how many children you can carry in your vehicle. (Note: according to School District Procedure 255, it is recommended that children under 12 years of age are not permitted to ride in an airbag protected seat).

☐ We require parent volunteers for this trip. Please indicate on the return form if you can volunteer.

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Field Trip Name _____

Comments (please include special concerns that school staff should be aware of surrounding your child's participation):

My child and I understand that both the district and school's Code of Conduct applies during the field trip. I will be responsible for any costs caused by my child's failure to abide by the Codes of Conduct, including any costs to send my child home.

**(Please print) I, _____, give permission for my child
_____, to participate in the extra-curricular field trip described above. I
understand that my child may be exposed to risk of injury due to accident while participating in this
activity.**

☐ I have included \$_____ payment for this field trip.

☐ My daytime contact phone number is _____

If this field trip requires parent drivers and / or volunteers, please complete the section below:

☐ I can volunteer for this field trip.

☐ I can drive for this field trip. I am able to take _____ children in seats without airbags.

☐ I have completed a Volunteer Driver Certification for Insurance Form.

☐ I have provided the school with a copy of my Police Information Check for the Vulnerable Section.

☐ I have provided the school with a copy of my Driver's Abstract.

Date

Parent/Guardian Signature

Contact Phone Number

***Please complete the attached consent form and return the completed form to
the sponsor teacher listed above by _____.***

Last revised: October 2023