

Learning for a Lifetime

1080 Winslow Avenue, Coquitlam, British Columbia V3J 0M6 • Phone 604-939-9201 • Fax: 604-939-7828

INTERNATIONAL FIELD TRIP INFORMED CONSENT FORM

SCHOOL NAME: _____ (**"School"**)

NAME OF TRIP: _____ (**"Program"**)

DATE OF TRIP - START: _____ **END:** _____ (**"Program Dates"**)

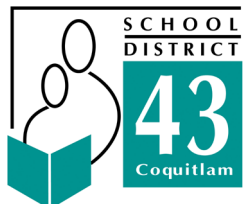
Student Name: _____ (**"Student"**)

The School District is offering eligible students an opportunity to participate in the above listed international trip (the "Program"). The School staff members organizing and supervising this Program ("Staff Organizers") will provide you with other information that describes the details of the Program and the related travel. Please ensure you read those materials carefully and contact the Staff Organizers if you have questions.

This Consent Form explains some of the challenges and risks that students who participate in the Program may encounter and the terms and conditions of their participation. This form must be signed both by the Student and their parent or guardian. Please review this form carefully before signing it.

I acknowledge and understand the following:

1. Participation in this Program is entirely voluntary. Those students who choose not to participate will not be negatively impacted in relation to other school events, activities or programs.
2. To be eligible for participation in the Program or program activities, students must satisfy any academic responsibilities and conduct requirements prior to and during the Program. Students who do not comply with these requirements or engage in disciplinary misconduct prior to the Program may not be permitted to participate in the Program.
3. While Staff Organizers take reasonable steps to prevent injuries or loss to students who choose to participate in the Program, some degree of risk is inherent in all international travel. It is not possible for Organizing Staff to anticipate or plan for any and all such risks. Students may encounter risks, such as illness or injury, theft or loss of property, financial risk, such as in the event that travel is interrupted, and other physical risks posed by events such as inclement weather, natural disaster (fire, flood, earthquake, etc.), civil unrest, labour strike or crime, vehicle or equipment failure, accident or disease, including pandemics. By providing your consent, you are acknowledging that you understand and accept that such risks may occur.
4. The School District relies on students and their parents/guardians to ensure that students do not participate in programs, events, or activities where it may be unsafe for them to do so due to a physical, medical or mental health reason. If you feel that participation in the Program or any Program activities may place the student at increased risk, we encourage you to consult with your medical professionals and discuss your concerns with the Organizing Staff.



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5. Student participants in the Program must attend all pre-trip meetings organized by the Staff Organizers to plan or prepare for the Program. Those meetings will address issues such as the activities to be undertaken in connection with the Program, the risks associated with the Program, and the expected standards of conduct and consequences of non-compliance with that standard of conduct.
6. In some circumstances, the School District may need to change, postpone, or cancel the Program. We expect those circumstances will be rare. However, this might occur for safety reasons or where due to circumstances outside the School District's control. Staff Organizers will provide prompt notification to students and parents/guardians should this become necessary.
7. To protect students and their parents/guardians against the financial and other risks posted by the Program, all students who participate in the Program will be required to purchase medical, travel and cancellation insurance ("Policies") with a third party insurance provider ("Insurer"). Students and their parent/guardians are responsible for pursuing any eligible claims under such Policies with the applicable Insurer, and any claim disputes arising under such Policies are between the student and/or their parent/guardian and the Insurer. **Parents/guardians are encouraged to carefully consider the terms of such Policies and purchase any additional coverage that they feel may be prudent or necessary.** All students must provide confirmation of adequate health and hospital insurance coverage prior to departure and must provide Organizing Staff with information concerning any known medical or health condition that may require emergency attention during the Program.
8. The use of alcohol, tobacco or illegal substances by student participants is strictly prohibited during Program travel and activities regardless of the circumstances, the age of the participants, or local laws, customs, and culture.
9. It is important that all students who participate in the Program observe School rules, appropriate standards of conduct, follow the directions of Organization Staff, refrain from behaviours that intentionally place themselves or others at risk, abide by all laws and customs of the destination and act as ambassador of the School District ("Conduct Requirements"). The School District reserves the right to deny students who breach the Conduct Requirements the right to participate in the Program or any Program activity. Students who engage in serious or repeated breaches of the Conduct Requirements or whose conduct, in the opinion of the Staff Organizers, is placing themselves or others at risk may be required to return home before the completion of the Program, in which case the parent/guardian will be responsible for paying or reimbursing the School District for all associated travel expenses incurred, including expenses incurred for a chaperone to accompany the student on the return trip.

STUDENT NAME _____

STUDENT SIGNATURE: _____

PARENT/GUARDIAN NAME _____

SIGNATURE OF PARENT/GUARDIAN _____

DATE _____