

1.<u>Broken Bones</u>2.<u>Concussion</u>3.Cuts and bruises

## PALLISER REGIONAL SCHOOLS Informed Consent/Permission Form for Minor Tours

## **DETAILS OF TOUR**

Nature of Tour:	<u>Ski Day at Nakiska</u>		
Date: March 3, 202 Time: Leave:	<u>23</u> <u>Various times</u> Return: <u>various</u>		
Destination:	Nakiska Ski Mountain		
Summary of Activities (Itinerary Attached): Students will spent the day at Nakiska ski Hill, skiing or snowboarding. Nakiska will be providing lessons for any student wishing to improve their skill. The day is open to all families of Brant Christian School.			
This is a non-school day.			
Supervisor(s): <u>parents will be looking after their own children, Mr. D will be at the hill to answel any questions</u>			
Transportation Arrangements: <u>Parents are responsible for arranging transportation to the ski hil</u> <u>for their children.</u>			
Cost to Student: <u>Vo</u>	<u>surious</u>		
Contact Person:	Mr. Doerksen         Phone:         403-684-3752		
ELEMENTS OF RISK			
Educational activity programs such as <u>Ski Day</u> involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injuries which may result from participating in <u>Ski Day</u> (describe activity).			

The risk of sustaining these types of injuries result from the nature of the activity and can occur without fault of either the student or the School Board, its employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that your/your child may be injured.

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

If you choose to participate in <u>Ski day</u> on <u>March 3 2023</u>, you must understand that you bear the responsibility for any injury that may occur.

The Board of Trustees of Palliser Regional School Division No. 26 does not provide accidental death, disability or dismemberment or medical expense insurance on behalf of the students participating in this activity.

We have read the above. We understand that by participating in the activity described

## **ACKNOWLEDGEMENT**

above, we are assuming the risks associated with doing so.			
Signature of Student:	Date:		
Signature of Parent/Guardian:	Date:		
PERMISSION			
I give (name of student) permission to par of activity) to be held on or about <u>March 3 2023</u> (date).	ticipate in the <u>Ski Day (</u> description		
Signature of Parent/ Guardian:	Date:		
Method of payment:  www.schoolcashonline.com			
Cheque			