

Caroline School Field Trip Parent Permission Form

Mr. Dean Pilipchuk
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Mr. Cory Whalen
Vice Principal
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5027- 48 Ave.
Caroline, AB
T0M 0M0

Tel(403)722-3833
Fax(403)722-3844

Dear Parent or Guardian:

We are writing to you with regard to the Caroline School High School Campout.

The organizing teacher for this field trip is Ms. Kirsten Collison.

This letter gives you detailed information about the trip. After you have carefully read this letter, if you wish to consent to the participation of your child in the activities, please sign the Parental Consent portion at the end of this letter and return that portion to the school. Please keep the remainder of this letter for your information and records.

Field Trip	Caroline School High School Campout
Class/Grade	Grades 10-12
Date(s) of Trip	Sept. 5-6, 2019
Cost per student	0\$
Names of Supervisors	Kirsten Collison, Dean Pilipchuk, Sandra Wilkie, Shelly Lewis and Rocsan Williams

ITINERARY

The deadline to return permission forms is Sept. 4th, 2019. If you have any questions, please contact the school at (403)722-3833.

Sincerely,

Kirsten Collison



Wild Rose School Division

4912-43 Street, Rocky Mountain House, AB T4T 1P4
Ph: 1-800-771-0537 | (403) 845-3376 | Fax: (403) 845-4287
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PARENT CONSENT FORM (please detach and return to school by _____)

Field Trip: Caroline School High School Campout

Date of Trip: Sept. 5-6, 2019

Lead Teacher: Kirsten Collison

Trip Supervisor(s): Kirsten Collison, Dean Pilipchuk, Sandra Wilkie, Shelly Lewis and Rocsan Williams

I, _____ parent/guardian of _____ give permission for
Parent/Guardian Name Student's Name

him/her to participate in the as described in this letter. I have read the letter and understand the program and conditions under which it is being offered. I am aware of the hazards associated with the transportation to and from, as well as participation in the activity.

I give my permission for the above listed student to be transported by school personnel or their designees and to participate in the above listed activity. I also authorize any necessary emergency medical treatment to be administered to the above named student.

I understand that this is a school sponsored program, that the students are expected to conduct themselves as responsible individuals, and that the rules and regulations of the school and Wild Rose School Division will apply at all times for the duration of the field trip.

Signature of Parent / Guardian

Date



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