

## INFORMED CONSENT/PERMISSION FORM FOR EDUCATION TRIPS Category 3, 4 or 5 - Students Under 18 Years (and Category 2 if engaging in High Care Activities)

The	is arranging
	(name of school)
(	(description of activity and dates)
	SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE OR GUARDIAN OF A PARTICIPATING STUDENT.
ELEMENTS OF RISK:	
	involve certain elements of risk. Injuries may occupwing list includes, but is not limited to, examples of the types of injury which (describe activity)
1.———	(describe activity)
2.	
3. ———	
	result from the nature of the activity and can occur without any fault of either yees/agents or the facility where the activity is taking place. By choosing the risk that you/your child may be injured.
The chance of an injury occurring can be reactivity.	educed by carefully following instructions at all times while engaged in the
	on, you must understand that yo ight occur. In case of serious student misconduct during this trip, the staff is e student and contact you to pick him/her up at the location of the activity costs.
	and Clarington Catholic District School Board does not provide accidenta expense insurance on behalf of the students participating in this activity.
ACKNOWLEDGEMENT	
WE HAVE READ THE ABOVE. WE UNDERS WE ARE ASSUMING THE RISKS ASSOCIA	STAND THAT IN PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, TED WITH DOING SO.
Signature of Student:	Date:
Signature of Parent/Guardian:	Date:
PERMISSION	
I give permi	ssion to participate in the
to be held on or about If If	my child is participating in an International excursion, I will keep apprised of
travel advisories in place at the time of the trip	ρ.
Signature of Parent/ Guardian:	Date: