

Consent Form



By signing below, I am giving my expressed consent and permission for my child to participate in the outlined event. I also absolve the school of any liability for actions resulting in injury and I give permission for the staff member in charge to make emergency medical decisions for my child in the event that the need arises.

Staff member(s) in charge: Mrs. Devries, Mrs. Klassen

Grade(s) or group(s) participating in this activity: Grades 3&4

Date of event: February, 14th, 2012 Time: 12:45pm-2:45pm

Place where event will take place: Terry Fox Sports Complex, Sledding Hill and Clubhouse

Details particular to this event: VALENTINE'S SLEDDING PARTY

Are drivers required? YES NO

NAME OF STUDENT: _____

SIGNATURE OF PARENT/GUARDIAN: _____

Please indicate if you are available to drive for this event : _____ YES _____ NO

Parents: Cut along this line and save the bottom portion for your records.

Staff member(s) in charge: Mrs. Devries, Mrs. Klassen

Grade(s) or group(s) participating in this activity: Grades 3&4

Date of event: February 14th, 2012 Time: 12:45pm-2:45pm

Place where event will take place: Terry Fox Sports Complex, Sledding Hill and Clubhouse

Details particular to this event:

Students should come dressed for outdoor activities on the sledding hill (snow pants, warm mittens, hats, boots, sleds) . **HELMETS are strongly advised.** Bring your valentines and some treats to share. Hot chocolate with marshmallows will be provided.