



This is an important notice. Please have it translated.

Dorothy Lynas Elementary 4000 Inlet Cres North Vancouver BC V7G 2R2 Telephone: 604-903-3430 Fax: 604 903-3431

Informed Consent – Handsworth Track and Triple Jump Qualifying Meet

May 15, 2019

To: Grade 4-7 Parents/Guardians

Destination: Handsworh Secondary Trip Date: May 21, 2019
Departure Time: 11:15 am Pick up: 3:30 pm

Transportation: School bus TO Handsworth Cost: Paid for by PAC

Parent arranged pick up

PURPOSE: To participate in track and triple jump qualifying meet for students to attend Swangard District Track and field Meet June 4, 2019 *NOTE*: This school field trip is optional. Alternate arrangements will be made for students who do not participate.

DESCRIPTION OF ACTIVITIES: Students who have qualified at the school level will have the opportunity to compete at Handworth to qualify to compete at Swangard District Track and Field meet.

TRANSPORTATION: Students will be transported to Handsworth by school bus and families will arrange their own transportation home from Handsworth.

SUPERVISION: Mr Shynkaryk, Mme Roe, Mme Voth, Mrs Badesha, M Ribière, Mme Quiring, Ms Denny

NATURE AND SCOPE OF RISKS: Motor vehicle accidents are always a risk on field trips. Students are required to follow adult instructions to and from and on the school bus. Students are expected to participate and conduct themselves according to the Dorothy Lynas Code of Conduct at all times to demonstrate sportsmanship, and maintain personal safety of themselves and others.

SAFETY PRECAUTIONS: A first aid kit and a cell phone will be taken by teacher supervisors. Student Emergency Procedure Plans/medical supplies will be brought for students with life-threatening medical conditions (e.g., anaphylaxis). Students are required to bring water, food, appropriate clothing and sun protection.

Sincerely, Track and Field Committee

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Return this Informed Consent Approval to School Office

Handsworth Track and Triple Jump Qualifying Meet - May 21, 2019

| I give my informed consent for my child, | , to participate in this field trip as outlined in |
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| the Informed Consent Notice dated May 15, 2019 | |
| | |
| PARENT/GUARDIAN NAME (Please print) | PARENT/GUARDIAN SIGNATURE |

Please return this form to the school office as quickly as possible as the Handsworth meet is right after the long weekend. Students will require this signed permission slip in order to board the bus. Thank you in advance!

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