Kindergarten <u>Christmas Around The World</u> December 11, 2024

7, St Anne St. St. Albert, T8N 3Z9, 780 459-1536

École Sacré Coeur 100 Sir Winston Churchill Ave St. Albert, AB T8N 5Y2 Phone: (780) 458-1112



Greater St. Albert Roman Catholic Separate School District No. 734 supports the practice of conducting educational field trips and excursions that enhance student learning as described in the Program of Studies and as aligned with the district mission statement. There are risks associated with every field trip. Please read this parent information carefully so that you can provide a well-informed parental consent for this field trip.

Please note that the board of trustees or the superintendent reserves the right to cancel any field trip up to the departure date in the event that there are severe issues or concerns with student and staff travel.

Staff Organizers: Mme		e Sunderman / Mme Crothers		
Trip Date(s):	Decemb	ber 11, 2024		
Class (es): N	12, M3	<i>W</i> 3		
Educational purpose of trip:		Students are going to the Christmas Around the World at St. Albert Public Library for the educational purpose of learning about Christmas traditions and decorating a sugar cookie.		
Charges to student:	\$	\$0.00		
Supervision details:		Our student/supervisor ratio will ve 6/1.		
•		Taking a school bus to the public library and back.		
Departure Tim	2: 9:1	9:10 AM		
Return Time:	11.	11:15 AM		

(NOTE: Parents have the ultimate authority in approving whether or not their child (if under the age of 18 years old) goes on the trip.

Please fill out the reverse side of this sheet and return to school by December 4, 2024.

PARENT APPROVAL FIELD TRIP FORM - Parent Copy

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Staff Organizers:	Mme Sund	derman / Mme Crothers	
Trip Date(s): De	ecember 11,	2024	
Class (es): M2,	M3		
Educational purp trip:	ose of	Students are going to the Christmas Around the World at St. Albert Public Library for the educational purpose of learning about Christmas traditions and decorating a sugar cookie.	
Charges to student:	\$0.00	\$0.00	
Supervision details:	Our student/supervisor ratio will be 6/1		
•		ng a school bus to the lic library and back.	
Departure Time:	9:10 AM		
Return Time:	11:15 AM		

(NOTE: Parents have the ultimate authority in approving whether or not their child (if under the age of 18 years old) goes on the trip.

Please see the back of this sheet and keep at home for your information

PARENT APPROVAL FIELD TRIP FORM page 2 - Parent Copy

Risks: **Low**; Regular risks associated with riding a bus. Students and adults must follow bus safety rules, and must stay seated at all times. Students must use caution when walking on uneven/slippery surfaces. Students must remain with the adult supervisor at all times when exiting and entering the bus, and walking to/from the destination.

I have read and understand the education and safety (risk) assessments provided concerning the **Christmas Around the World Field Trip.**

If my child requires medical attention, I authorize the supervisors to seek necessary medical treatment. Information about my child that field trip personnel need to know for this excursion: (medical or other)

If you have any questions about the collection, use or disclosure of information collected on this form, please contact your **School's Field Trip Organizer**.

Please keep this section for your records

I am prepared to volunteer for this trip as a supervisor. (You will be contacted) and I have obtained my Criminal Record Check & Child Welfare Record Check.
Risks: Low ; Regular risks associated with riding a bus. Students and adults must follow bus safety rules, and must stay seated at all times. Walking on ice and snow to get to the destination. Students must use caution when walking on uneven/slippery surfaces. Students must remain with the adult supervisor at all times when exiting and entering the bus, and walking to/from the destination.
I have read and understand the education and safety (risk) assessments provided concerning the Kindergarten Christmas Around the World Field Trip at the St. Albert Library.
If my child requires medical attention, I authorize the supervisors to seek necessary medical treatment. Information about my child that field trip personnel need to know for this excursion: (medical or other)
In case of an emergency I may be contacted at:
Home telephone(s):
Work telephone(s):
Cellular telephone:
An alternate emergency contact is:
Name:
Relationship:
Home telephone(s):
Work telephone(s):
Cellular telephone:
l authorizeclass
To attend Kindergarten Christmas Around the World Field Trip. on the above-listed date by <u>bus</u> .
Signature of Parent/Guardian
Date:
If you have any questions about the collection, use or disclosure of information collected on this form, please contact your School's Field Trip Organizer .

Please RETURN this section to School

I approve of my son's/daughter's attendance on this

field trip and the planning regarding this trip.

PARENT APPROVAL FIELD TRIP FORM page 2 - School Copy