

HOLY CROSS CATHOLIC SCHOOL
521 CLOTHIER STREET WEST
KEMPTVILLE, ONTARIO K0G 1J
TEL. (613) 258-7457 FAX. (613) 258 9867
Principal: Mr. Robert Hannigan
Vice-Principal: Mr. Matthew Hubbard



PERMISSION FORM

EVENT: Ultimate Frisbee Tournament

DATE: Tuesday, October 16, 2018 (rain date: Friday, October 19)

CLASSES ATTENDING: Ms. Holmes, Mrs. Rutherford, Mrs. Vallat-Murphy

TRANSPORTATION: All students will walk to Riverside Park

TIME OF DEPARTURE: 9:20 a.m. TIME OF RETURN: 3:15 p.m.

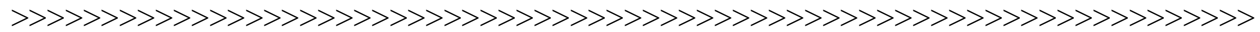
COST: No Cost

REQUIREMENTS: Please bring your own lunch, snacks, and water bottles. Please ensure that your child is wearing comfortable footwear and is dressed for the weather (i.e. sunhat, sunscreen, raingear).

SUPERVISION: We are looking for volunteers to help supervise the children. If you wish to join us, please indicate this on the permission form below.

\*\*\* ALL VOLUNTEERS MUST HAVE A CURRENT VULNERABLE SECTOR CHECK ON FILE AT THE OFFICE.

ELEMENTS OF RISK: Any educational activity and the transportation for that activity, involves certain elements of risk. These can occur without any fault of the student, the school board, its employees or agents, or the facility where the activity is taking place. Any allergies or other medical conditions MUST be brought to the attention of the teacher/supervisor along with appropriate medication. The Catholic District School Board of Eastern Ontario does not provide any accidental death, disability, dismemberment or medical insurance on behalf of the students participating in this activity.



Detach and return this portion to the school by Friday, October 12th.

Online Reference #: \_\_\_\_\_

PERMISSION

I, \_\_\_\_\_ (parent/guardian) of \_\_\_\_\_ (student) consent to my son/daughter \_\_\_\_\_ (student) participating in the Ultimate Frisbee Tournament on Tuesday, October 16, 2018.

Parent's signature

I would like to volunteer for this field trip and have a current vulnerable sector check on file at the school.

Name

Phone Number

In the event that an emergency situation arises which, in the opinion of the attending physician, requires an immediate decision and I cannot be reached, I authorize the teacher supervising the field trip to make decisions of a medical nature on behalf of my child.

Be Holy!! Joy Springs from a Loving Heart!!