

## Toronto District School Board Parent/Guardian Permission for Excursion

The collection and retention of the information requested on this form is authorized and governed by the Ontario *Education Act* and the *Municipal Freedom of Information and Protection of Privacy Act*.

School: \_\_\_\_\_ Telephone: \_\_\_\_\_

Teacher(s): \_\_\_\_\_ Grade(s): \_\_\_\_\_ Number of Students: \_\_\_\_\_

Student: \_\_\_\_\_

### To Parents and Guardian:

The purpose of this form is to inform you about the excursion and to seek your support and permission for your child/ward to participate. This information may be shared as necessary with adults supervising the excursion.

*This is an important document. Please ensure that someone is able to translate and explain this document to you.*

Educational purpose of the excursion: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Departure from School: Date \_\_\_\_\_ Time \_\_\_\_\_

Return to School: Date \_\_\_\_\_ Time \_\_\_\_\_

*In exceptional circumstances, dates and times may change. Every effort will be made to communicate these changes to you ahead of time.*

### Travel arrangements:

TDSB bus \_\_\_\_\_ Commercial vehicle \_\_\_\_\_ Public transit \_\_\_\_\_ Other: \_\_\_\_\_

Private vehicle/volunteer driver \_\_\_\_\_

*Approval of the principal is required for all volunteer drivers. The school will make every effort to ensure that Parent/ Guardian consent is obtained for each excursion for students to travel in private vehicles.*

### Requirements for participants:

Food/snacks \_\_\_\_\_ Money \_\_\_\_\_

Notebook \_\_\_\_\_ Clothing and equipment \_\_\_\_\_

Other: \_\_\_\_\_

Program schedule/itinerary and activities to be undertaken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physical description of the area to be visited (e.g., lake, park, river, etc.): \_\_\_\_\_  
\_\_\_\_\_

As part of the excursion students will be participating in the following high care activities. These activities involve increased risk or special safety considerations, or require special qualifications or certification for supervision. Appropriate supervision will be provided.

Accommodation (if required): \_\_\_\_\_

### Financial Arrangements:

Total Cost per person: \$ \_\_\_\_\_ To be paid by Student: \$ \_\_\_\_\_ To be paid by School/Board: \$ \_\_\_\_\_

Fund raising/subsidies/sponsors: \$ \_\_\_\_\_ Deposit required: \$ \_\_\_\_\_ Payable to: \_\_\_\_\_

### Excursion staff:

Teacher in charge: \_\_\_\_\_

Supervising teachers: \_\_\_\_\_

Volunteers: \_\_\_\_\_

Special qualifications and or certification of staff relevant to this excursion \_\_\_\_\_

School contact during the excursion \_\_\_\_\_

Date: \_\_\_\_\_ Teacher \_\_\_\_\_ Administrator \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

*A copy of this signed form (and other related signed forms) will be kept in the school until, at least, the end of June of the school year following the school year in which the excursion takes place.*

#### Notes to Parents/Guardians:

- Please inform the school of any changes to the medical and emergency information for your child/ward. If your child/ward has, or has had, any health problems that might affect his/her participation or safety or require special attention for him/her during the excursion, please give full details in writing and telephone the teacher to discuss any concerns. Please use the 511E: Medical Information for Excursions form, available from the school.
- The Board's Safe Schools Policy and this school's Code of Behaviour and the Board's Human Rights Policy apply throughout the trip. Copies are available from the school office.
- Student accident insurance is available to provide coverage beyond that allowed by the Ontario Health Plan. Contact the school for specific information and application forms.
- **I understand and agree that if I permit my child/ward to participate, the Toronto District School Board will have complete discretion to cancel this excursion in the interest of student safety or for any other emergency, and that in such event, I will be liable for any non-refundable deposit associated with this activity.**
- I further understand and agree that if I permit my child/ward to participate, the Board has complete authority and discretion to exclude my child/ward/me from participation in this activity or to send my child/ward/me home from the activity early for breach of the Board's *Safe Schools Policy* or the school's *Code of Behaviour* or the Board's *Human Rights Policy*, and in such event, I will be responsible for any related expenses, including lost deposit and additional travel costs.

#### Parents/Guardians Responsibilities

- Custodial parent(s) or guardian(s) of students under the age of 18 who wish their child to participate in an excursion are required to provide consent for each excursion by completing and returning to the teacher a form 511C: Parent/Guardian Permission for Excursion form (or the appropriate athletics form). Students age 18 and over may sign the 511C: Parent/Guardian Permission for Excursion form (or the appropriate athletics form) on their own behalf; however, it is strongly recommended that the custodial parent(s) or guardian(s) of such students also sign the form.
- The 511C: Parent/Guardian Permission for Excursion form (or the appropriate athletics form) will contain information about the nature and purpose of the excursion, any special risks or unusual activities, locations, date(s) and/or times, supervision, transportation arrangements, including mode of transport, use of volunteer drivers, costs, special clothing or equipment required, lunch or other food requirements, any other information that could have some bearing on whether the parent/guardian would give or withhold consent, a request to update relevant medical or emergency information, and a reminder that student accident insurance may be purchased.
- Every effort shall be made to advise custodial parent(s) or guardian(s) of any volunteer drivers participating in the excursion, and to provide them with specific information about the volunteer drivers' vehicles. Every effort shall be made to obtain written informed consent from the custodial parent(s) or guardian(s) in order for the student to ride with a volunteer driver.
- Custodial parent(s) or guardian(s) (or the student, where the student is age 18 or over) who wish their child to participate in an excursion are required to indicate if there is there any medical reason why their child should not participate in the activity, or which may lead him/her to require special attention during the activity.
- For excursions involving high care activities or for overnight excursions, parents shall also provide additional consent for these excursions by signing and returning to the teacher a 511E: Medical Information for Excursions form authorizing the teacher-in-charge of the excursion to seek and obtain medical care, if necessary, for the student.
- This medical information may be requested annually by the school and custodial parent(s) or guardian(s) are expected to provide the school with any relevant information or changes throughout the school year.
- Custodial parent(s) or guardian(s) are expected to ensure that their child is prepared appropriately for the excursion.
- Custodial parent(s) or guardian(s) are responsible for any applicable losses or costs should their child engage in misconduct, including a breach of the TDSB's Safe Schools Policy or the school's Code of Behaviour, or for interschool athletics, the Code of Behaviour for Athletes. This could include lost deposit fees, costs for transportation home or for damages resulting from misconduct.

Please detach this page, sign in either the **YES** or the **NO** box and return this form to the school by:

# YES

I give permission for my child, \_\_\_\_\_

to participate in the excursion to \_\_\_\_\_

subject to the conditions outlined in Notes to Parents/Guardians on page 2.

Emergency Contact: \_\_\_\_\_

Emergency Phone Number: \_\_\_\_\_

Is there any medical reason why your child should not participate in the activity, or which may lead him/her to require special attention during the activity? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I certify that my child has health coverage.**

**OHIP # \_\_\_\_\_ or**

**Private Health Insurance # \_\_\_\_\_**

**Without coverage, in case of injury or disease, hospitalization cannot be guaranteed and therefore the student cannot participate.**

**I certify that I have read and understood the Parents'/Guardians' responsibilities in Parents'/Guardians' Responsibilities section.**

**I wish to volunteer on this trip: \_\_\_\_\_**

**Signature of Parent/Guardian \_\_\_\_\_**

*or Student if 18 years old or older*

# NO

**I do not give permission for my child,**

\_\_\_\_\_

**to participate in the excursion to**

\_\_\_\_\_

**Signature of Parent/Guardian**

\_\_\_\_\_

*or Student if 18 years old or older*

**Today's date: \_\_\_\_\_**