



PERMISSION FORM

WHS Off Campus Events (within Town of Wainwright limits)

Parents/Guardians, the following grade(s), class, or team is planning a school related field trip. Please read this permission form carefully, and then sign and return to your child’s school.

School: Wainwright High School	Grade(s), Class, or Team: Grade 7-12	
Title of Activity: WHS Off-Campus Events, including but not limited to Physical Education, Terry Fox Run, Ballarama, etc.	Date(s) of Trip: September 2, 2025-June 25, 2026	
Location of Activity: Events and classes within the Town limits of Wainwright.	Time of Departure: TBD, will vary between 8:50am and 3:27pm.	Time of Return: TBD, will vary between 8:50am and 3:27pm.
Description of Activity: WHS Off-Campus Events, including but not limited to Physical Education, Terry Fox Run, Ballarama, volunteering, leadership, and community service, etc.		
Educational Purpose of Trip: Physical Education, Leadership Activities, Class Trips and Community Service within the limits of the Town of Vermilion		
Method of Transportation: School Bus School or Division Vehicle Private Vehicle Walking Other: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> </div>		
Costs to students: Transportation: \$ _____ Activity costs: \$ _____ Equipment Rental \$ _____ Other: \$ _____ Total: \$0		
Supervisor/student ratio: Classroom teacher/EAs with their assigned class. Approximately 1:30	Key Supervisor Qualifications: Classroom ATA teacher and other WHS staff members	
Person(s) identified as the first aider: Mr. Martin, Mrs. Belanger, Mrs. Guy, Pearl-Ann Gooding, Judy Large	Teacher in charge and other BTPS staff involved in a formal supervisory capacity: Teacher/ATA Rep – Mr. Martin All WHS staff	
Description of specialized clothing or equipment required: Weather/activity appropriate clothing and equipment.		
Rules & expectations for student conduct: Students will represent WHS in a positive, respectful manner, showing gratitude to all people involved.		
Safety Elements & Associated Risks Educational activity programs require attention to safety. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of safety concerns related to the trip noted above. Being aware of the environment and follow the rules and expectations of the Town of Wainwright and Wainwright High School.		
Such concerns result from the nature of the activity and can occur without fault of either the student, or the school board, its Employees/agents, or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured.		



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(Please see the attachment for trip itinerary)

OPT OUT

I do not give my child permission to participate in this activity.

ACKNOWLEDGEMENT:

WE HAVE READ PAGE 1, AND BY SIGNING BELOW, ACKNOWLEDGE THAT WE ALLOW OUR CHILD TO PARTICIPATE IN THE ACTIVITIES, AND IN DOING SO, RECOGNIZE AND ACCEPT THAT THERE MAY BE ASSOCIATED RISKS INVOLVED.

I give my child, _____, permission to participate in the above-described activity.
(name of student)

Signature of Parent/Guardian: _____ Date: _____

Signature of Student: _____ Date _____

Parents/Guardians: Please sign and return this form to your child's school. Thank you