

Athletics Field Trip Parent Permission Letter

Field Trip Name Cross country running team

Field Trip Activity CROSS COUNTRY RUNNING

School Travelling With n/a

After you have carefully read this letter, we ask that you sign and return **only the** "Parental Consent" portion to the school (the last page in this document). Please keep the remainder for your information and records.

Field Trip Details

Students on the cross-country running team will be practising in the neighbourhood around Austin O'Brien High School. For Monday practises, we will transport the students to Gold Bar park after school. We will also be transporting students to the Wednesday races.

Schedule Attached Yes

Cost \$ 45.00

Program of Studies Specific Outcomes

n/a

Grades Attending 10-12

Course(s) Student(s) Registered In

n/a

Number of Attending Students 10

Number of Attending Administrators 0

Number of Attending Teachers 2

Number of Non-Teaching School Staff 0

Number of Attending Volunteers 0

Lead Teacher and Contact Bryn Jonzon (T)

Attending Administrators, Teachers, Supervisors and Volunteers

Marco Profiri (T)

Communication Plan

The principal will be advised of any accidents, problems, unusual incidents or weather related concerns that may occur during the field trip. As well parents guardians will be contacted if health issues, injuries, or student conduct are a concern with their children.

Method of Transportation AOB bus

Carrier Name n/a

Telephone # n/a

Detailed Itinerary of the trip (Including, if applicable, information regarding accommodations) Attached

Safety Precautions We will run outdoors rain or shine but will move indoors if there is thunder or lightning.

Equipment Required Students may want to wear a watch or other device to time themselves. They should also bring a water bottle and snack to all practises and races.

Clothing Required Running shoes and athletic clothing are required. A school singlet will be provided for the students.

Other Information n/a

Risks - Inherent, special or unusual risks associated with the field trip

Cross Country Running is a vigorous physical activity with inherent risks such as ankle rollovers, sprains, strains.

All manner of injuries resulting in muscular and soft tissue injuries including bruises, scrapes, cuts, floor, uneven surfaces, contact with other participants.

All manner of injuries resulting in dislocations, concussions, whiplash, contusions, sprains, pulled or strained muscles, knee injuries and broken bones.

All manner of head, neck, spinal, facial, eye, nose and/or dental injuries.

All manner of injuries and/or death which may result in the transportation to and from the facility.
n/a


Date Submitted for Approval Aug 28, 2025

Signatures


Principal (Signature)

Susan Coates
Print Name

Aug 29/25
Date


Lead Teacher and Contact (Signature)

Bryn Jonzon
Print Name

Aug. 29, 2025
Date

Austin O'Brien H.S.
PARENTAL CONSENT

Parental Consent and Total Costs (if applicable) due by: **Sep 5, 2025**

Student Name _____ **Grade** _____

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Method of Transportation AOB bus

Please Indicate your fieldtrip payment method:

Online Payment for \$ _____

Additional Information / Explanation

MEDICAL CONDITION

The following is a list of my child's medical conditions (including allergies, conditions requiring medication, etc), a list of medication that my child must take and any special instructions regarding medication storage and administration.

I have reviewed and understand the information provided in this Parent Permission Letter, I consent to my child partaking in the field trip(s) as described in the Parent Permission Letter and I agree that this planned activity is acceptable. I also acknowledge and agree that during the planned field trip(s), _____ (name of student) is to act in accordance of the Education Act, Division policy and rules as to student conduct.

I understand that pursuant to Administrative Procedures 260, no parent shall be reimbursed for the loss of any field trip monies if the field trip is cancelled or interrupted for any reason. This includes any form of deposit. However, a parent shall be reimbursed field trip monies if the field trip is cancelled or interrupted and the school has not provided said monies at the time of cancellation to any third party travel-related agency which assisted in organizing the field trip, and the related contract between the district and the agency or the insurance provider permits a refund of field trip monies in the circumstances.

I understand and agree that where circumstances arise during the field trip, such as changes in itineraries or adverse weather or road conditions, the Lead Teacher, in consultation with the Principal, may make changes in itineraries and travel/arrival plans for my child. I understand that a reasonable effort will be made to advise me of such a change.

If my child requires medical attention, I authorize the supervisors to seek necessary medical treatment / intervention in the event of an emergency.

Parent signature: _____ **Name** _____ **Date:** _____

Relationship: ☐ Mother ☐ Father ☐ Other Legal Guardian

Emergency Parent Contact and Phone Number _____