EDMONTON CATHOLIC SCHOOLS

, Canada

Athletics Field Trip Parent Permission Letter

Field Trip Name Swim Team

Field Trip Activity SWIMMING

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

The Swim Team will be practicing from 3:15 - 4:00 pm Mondays and Thursdays at Hardisty Leisure Centre (10535 65 St NW) on the following days:
Sept. 29
Oct. 1, 6, 8, 15, 20, 22, 27, 29
Nov. 1, 3, 5, 17, 19, 24

Swim Meets:
Divisional Meet at Kinsmen Sports Centre (9100 Walterdale Hill, Edmonton, AB T6E 2V3): Wed. Nov. 26
Championship Meet at Kinsem: Thurs. Nov. 27 *Only swimmers who qualify from Divisionals will be attending this day.

The school airporter will be available for swimmers to get a ride to Hardisty pool for swim practices. *Swimmers will be responsible for getting home after practice on their own. The bus will leave at 2:55 pm, and students will be responsible for any class work missed as they will be dismissed early.
-If a swimmer is driving themselves or getting to practice a different way, please indicate this on the field trip form.

Transportation to the swim meets will be shared closer to the dates of the meets.
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Activities

Activity	Date	Time	Location	Address
Practice	9/29/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/1/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/6/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/8/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/15/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/20/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/22/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/27/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	10/29/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7

Practice	11/3/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	11/5/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	11/17/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	11/19/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Practice	11/24/2025	2:55 - 4:00 pm	Hardisty Leisure Centre	10535 65 St NW, Edmonton, AB T6A 3X7
Game	11/26/2025	Approx. 7:00 am - 3:00 pm	Kinsem Sports Centre	9100 Walterdale Hill, Edmonton, AB T6E 2V3
Game	11/27/2025	Approx. 7:00 am - 2:00 pm	Kinsem Sports Centre	9100 Walterdale Hill, Edmonton, AB T6E 2V3

Cost $80

Program of Studies Specific Outcomes

Physical Education:
A10-13 adapt and improve activity-specific skills in a variety of individual pursuits; e.g., resistance training, aerobics
B10-3 plan, assess and maintain personal fitness, using the principles of training: frequency, intensity, duration
C10-3 demonstrate etiquette and fair play
C10-5 develop and apply practices that contribute to teamwork
D10-9 demonstrate decision-making skills that reflect choices for daily activity within the school and the community

Grades Attending Grades 10 - 12

Course(s) Student(s) Registered In

n/a

Number of Attending Students 30

Number of Attending Administrators _____

Number of Attending Teachers 2

Number of Non-Teaching School Staff 0

Number of Attending Volunteers 0

Lead Teacher and Contact Amanda Harasem 780-466-3161

Attending Administrators, Teachers, Supervisors and Volunteers

A. Harasem (T), K. Smith (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 School Airporter

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

Equipment Required Towel and googles
Swim cap *AOB one will be provided

Clothing Required Swim suit

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

Slip/Trip/Fall hazards associated with wet pool deck surfaces, change rooms, pool toys, running, horseplay and towels which may cause bruises, scrapes,cuts, broken bones or concussion.

Injury or Drowning exposures due to diving, water too deep for students, skill level, swallow water, panic, no guards on drains or filter systems, no life guard on duty, horseplay, inadequate life safety equipment.

Chemical exposures due to chlorine and associated pool treatments, possible physical reactions for students

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

Date Submitted for Approval Sep 9, 2025

Signatures

[signature]	Susan Coates	Sept 11/25
Principal (Signature)	**Print Name**	**Date**
[signature]	Kailee Smith	Sept. 11, 2025
Lead Teacher and Contact (Signature)	**Print Name**	**Date**

Austin O'Brien H.S.

PARENTAL CONSENT

Parental Consent and Total Costs (if applicable) due by: Sep 26, 2025

Student Name _____ **Grade** _____

Field Trip Activity SWIMMING

Method of Transportation School Airporter

Please Indicate your fieldtrip payment method:

Cash $ _____ Interact or Credit payment in office for $ _____ 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 _____