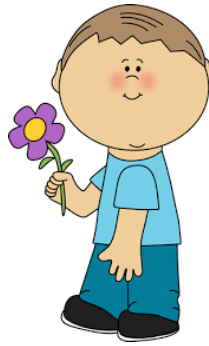




Auguston Traditional Elementary School



School Year 2020-21

Dear Parents,

We are fortunate that we live in a very beautiful part of the world. The area around our school provides many interesting things to see and do. During the school year, there will be times when students will be **walking off the school grounds** for a variety of school activities (ie. nature walks, etc.). At other times, some of our students will be taking short hikes in the area or participating in science and art lessons. **At all of these times, students will be fully supervised by our school staff.** By completing the consent form below, you will be giving us permission to make **short excursions off the school grounds throughout the 2020-21 school year.** All regular field trips including the use of school busses will still require separate permission (when/if field trips resume). If you have any questions or concerns, please do not hesitate to contact me at the school at 604-557-0422. Thank you.

Yours sincerely,

R. Colbert
Principal

**** Please return the tear-off below to your child's teacher by Friday, October 9. ****

Permission for Off Grounds

I hereby give consent for my child _____ to participate in short excursions from
(student's name)
the Auguston school grounds during the 2020-21 school year. I understand that my child will always be directly supervised by Auguston staff when the students are taken off the school grounds.

Accidents can be the result of the nature of the activity and can occur with or without any fault on the part of the student, the school board or its employees or agents, or the facility where the activity is taking place. By allowing your son/daughter to participate in this activity, you are accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for your child. I understand that my child may be exposed to certain risks while participating in this activity. Accidents and injuries may occur.

Signature of Parent/Legal Guardian

Printed Name of Parent/Legal Guardian

Date

Phone Number