



## Stony Plain Central School

5108 - 55 Avenue, Stony Plain, Alberta T7Z 1R4

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spc@psd.ca

Monday, February 28, 2022

Dear Grade 6 Parent/Guardians:

We have an exciting field trip planned! On April 6, 2022, all Grade 6's will travel by bus to the Telus World of Science in Edmonton for the day. They will spend the morning exploring the science exhibits where they will visit exhibit stations: Indigenous Traditional Room, S.P.A.C.E. Gallery and star Dome, The Science Garage and also learn within the brand new Health Zone room. Then they will then spend the afternoon watching an IMAX movie about the powerful telescope camera Hubble!

The bus will leave Stony Plain Central at 8:30 am (so please make sure you are on time that day!) and return at 2:50 pm. The students are asked not to bring backpacks, just a bagged lunch that does not require a microwave or a kettle.

The cost for this trip is \$26 /student. Please return the signed form and payment by Friday, March 11, 2022.

Sincerely,

The Grade 6 Team

Mrs. Wakefield and Mr. John Szewczuk



## Stony Plain Central Offsite Field Trip Permission

Date of Activity	April 6, 2022		Teacher(s)	Yolanda Wakefield John Szewczuk	
Activity	Telus World of Science - Sky Science Mission Space Galiery exploration, Explore The Universe, Hubble (IMAX)		Grade(s)	5W and 6S	
Location	Telus World of Science (Edmonton)		# of Parent Helpers Req'd	N/A	
Start Time	8:30 AM	Bus leaves from Stony Plain Central	End Time	2:00 PM	Bus leaves from Telus World of Science
Lunch	Bring a bag lunch		Please Return Form By	Friday, March 11, 2022	
Comments	In order to cover the costs of the bus and the activities that we will be participating in at Telus each student must \$26.00 for this field trip.				

### ACKNOWLEDGEMENT OF RISK AND INFORMED CONSENT

I/We acknowledge that my child will participate in the fieldtrips/activities as outlined. These activities involve certain risks, dangers and hazards to the participants. These may include, but are not limited to, personal injury, death, property damage, expense and other loss, delay or inconvenience and trip or event cancellation or curtailment.

I/We understand that during these activities, authorized staff of Parkland School Division staff, supervisory adults, as well as employees of other agencies associated with this activity will endeavour to instruct, protect, and care for the well-being of my child as would I in their place, including making decisions regarding the medical care of my child and/or transportation to receive medical care.

I/We understand that my child will be expected to uphold the behaviour expectations of students of Parkland School Division as in any other school endeavour as outlined in the Student Code of Conduct. I understand that my child's failure to abide by behaviour expectations could result in his/her removal from the activity.

I/We have discussed the risks and expectations of this activity(s) with my child and have confidence that my child has understood them. I am aware that every parent has the right to deny his/her child's participation in an off-site activity and that this activity(s) is/are not a prerequisite for the completion of any required course of study. As parent/guardian, I will ensure my child is appropriately prepared and has the necessary equipment.

I/We are aware that the Program Facilitator reserves the right to postpone, terminate or cancel an activity at any time and with little notice if the activity can no longer be conducted in a safe and secure manner.

I/We understand that the Superintendent of Parkland School Division may cancel or interrupt any approved off-site activity at any time up to the point of return from that activity, where the Superintendent considers the safety and well being of students and supervisors to be at unusual risk, real or potential, due to emergent circumstances. Such a decision will consider any emergent change in social, political, health, legal or physical environment that may contribute to risk greater than that which existed when the offsite activity was originally given approval. Further, I/we understand that only those costs will be reimbursed that are made available or returned to Parkland School Division as a product of the cancellation of the offsite activity.

I/We have read and understood the above statements at my leisure, understood the nature of the document and its content. I consent to the participation of my child in this activity and associated activities.

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Student Name	Homeroom	Class/Teacher
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Printed Name of Parent/Guardian	Signature of Parent/Guardian	Date	Phone Number
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**This permission sheet must be returned for your child's participation – written notes or phone calls are not acceptable**