BK Running Club



175 Larose Drive St. Albert, Alberta T8N 2G7 Phone: (780) 458-6101 Fax: (780) 458-8360

Greater St. Albert Roman Catholic Separate School District No. 734 supports the practice of conducting educational field trips and excursions that enhance student learning as described in the Program of Studies and as aligned with the district mission statement. There are risks associated with every field trip. Please read this parent information carefully so that you can provide a well-informed parental consent for this field trip.

Please note that the board of trustees or the superintendent reserves the right to cancel any field trip up to the departure date in the event that there are severe issues or concerns with student and staff travel.

The coaches of the B.K. BobKats are roaring to start the **2019-20 season** on Tuesday, November 5, 2019.

Practices will be every Tuesday and Thursday at 8am. We will finish in time for students to change and eat a snack before the start of the school day.

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Staff Organizers: Mrs. D. Kaplar, Mrs. C. Traynor			
Trip Date(s): Tuesda	ay and Thursday mornings		
Class (es): Grade	des 3-6		
Educational purpose of trip: Training			
Supervision details:	Equivalent to classroom		
Transportation	N/A		
Details:			
Departure Time:	N/A		
Return Time:	N/A		
	\$50 with shirt, \$40 without shirt,		
Charges to student:	including transportation, entry fees &		
	equipment		

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https://GSACRD.schoolcashonline.com

(NOTE: Parents have the ultimate authority in approving whether or not their child (if under the age of 18 years old) goes on the trip.

Consent forms will still be required and sent home each time we leave the school property with details of that particular meet. Please send your child to practice with a water bottle and a healthy snack for after practice. Should you have any questions or wish to discuss this further, please feel free to contact Mrs. Kaplar, Mrs. Traynor or the administration at 780-458-6101.

Please fill out the right side of this sheet and return to school by Thursday, October 31st.

PARENT APPROVAL FIELD TRIP FORM – Parent Copy

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Please see the back of this sheet and keep this half at home for your information.

PARENT APPROVAL FIELD TRIP FORM page 2 – Parent Copy	PARENT APPROVAL FIELD TRIP FORM page 2 – School Copy			
I approve of my child to be a team member with the BK Running Club.	I approve of my child to be a team member with the BK Running Club.			
Risks: Any and all risks associated with running in the hallways and gym, there is the possibility that someone could enter the hallway from a classroom door and/or that there could be water or other items on the floors causing a danger of accident or injury.	Risks: Any and all risks associated with running in the hallways and gym, there is the possibility that someone could enter the hallway from a classroom door and/or that there could be water or other items on the floors causing a danger of accident or injury.			
If my child requires medical attention, I authorize the supervisors to seek necessary medical treatment. Information about my child that field trip personnel need to know for this excursion: (medical or other)	If my child requires medical attention, I authorize the supervisors to seek necessary medical treatment. Information about my child that field trip personnel need to know for this excursion: (medical or other)			
In case of an emergency I may be contacted at:	In case of an emergency I may be contacted at:			
Home telephone(s):	Home telephone(s):			
Work telephone(s):	Work telephone(s):			
Cell telephone:	Cell telephone:			
An alternate emergency contact is:	An alternate emergency contact is:			
Name:	Name:			
Relationship:	Relationship:			
Home telephone(s):	Home telephone(s):			
Work telephone(s):	Work telephone(s):			
Cellular telephone:	Cellular telephone:			
I authorizeclass	I authorizeclass			
I have filled out the copy of F 341-4 (Interschool Athletic Program) (Grade 3 students) We have grade 4, 5, and 6 already.	I have filled out the copy of F 341-4 (Interschool Athletic Program) (Grade 3 students) We have grade 4, 5, and 6 already.			
Signature of	Signature of			
Parent/Guardian	Parent/Guardian —			
Date:	Date:			
If you have any questions about the collection, use or disclosure of information collected on this form, please contact Mrs. Kaplar	If you have any questions about the collection, use or disclosure of information collected on this form, please contact Mrs. Kaplar			
Please keep this section for your records	Places PETLIPNI this section to School			

Please RETURN this section to School