



\* This form should go to ALL governing board members NOT just the chair.

\* No blanket approval for Sept-June neighborhood activities ex) Terry Fox, Phys Ed, (sports)  
Extra-Curricular Activities and Field Trip Policy

### ADDENDUM C Extra-Curricular Activities and Field Trip Cover Page

SCHOOL: \_\_\_\_\_

EDUCATIONAL OBJECTIVE: \_\_\_\_\_

THEME OF ACTIVITY: \_\_\_\_\_

DESTINATION: \_\_\_\_\_

DATE(s): \_\_\_\_\_ TIME PERIOD: \_\_\_\_\_

METHOD OF TRANSPORTATION: \_\_\_\_\_ GRADE LEVEL: \_\_\_\_\_

SUPERVISION:  
    
ADULTS STUDENTS ADULT/STUDENT RATIO

EXPENSES:  
 \$  \$  
COST PER STUDENT ANTICIPATED TOTAL COST

PERSON(S) RESPONSIBLE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
OTHER ADULTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Number of students requiring separate adult/student ratio

INFORMATION INCLUDED WITH THIS APPLICATION:  
(PLEASE CHECK BELOW)  
 PROGRAM OF ACTIVITIES  
 INFORMATION LETTER TO PARENTS  
 BUDGET  
 ADDITIONAL RULES OF CONDUCT & SAFETY (IF APPLICABLE)  
 PARTICIPANTS  
 NAME/ASSOCIATION OF QUALIFIED LIFEGUARDS (SWIMMING)  
 SYNOPSIS OF A TRIP OUTSIDE CANADA FORM (IF APPLICABLE)  
 PERMISSION & RELEASE FORM (CONFIDENTIAL)  
 EMERGENCY MEDICAL TREATMENT FORM (CONFIDENTIAL)  
 Additional risk identifiers (if applicable)

PROGRAM APPROVED BY GOVERNING BOARD: \_\_\_\_\_ DATE: \_\_\_\_\_  
SIGNATURE OF ADMINISTRATOR: \_\_\_\_\_ DATE: \_\_\_\_\_  
SIGNATURE OF REGIONAL DIRECTOR (IF APPLICABLE): \_\_\_\_\_ DATE: \_\_\_\_\_

**This form must be completed and kept at the school for day trips. For water activities and overnight trips, the form is to be sent to the Sector Director as per section 6.**