

FORM 230-14				
Adopted	April 2005			
Last Revised	May 2015			
Review Date	May 2020			

## SECONDARY HEALTH AND PHYSICAL EDUCATION CONSENT TO PARTICIPATE IN ACTIVITIES OFF SCHOOL PROPERTY

School:	ool: Date:							
Teacher:			Cou	ırse:				
Dear Parent/Guardian:								
Our Health and Physical Education/He community. If any activity is consider required equipment and elements of regular, supervised components of our	ed "High-Ca isk.	re" a sepa	arate conser	nt form will	be sent ho	ome with detailed information a		
Activity		Location				Time frame (when)		
	MEDICAL A	AND EMER	GENCY INFO	ORMATION L	JPDATE			
Student Name:								
Parent/Guardian Name:								
Parent/Guardian Phone #:			W	/ork #:		Cell #:		
Alternate Emergency Contact Name: _			PI	none #:				
Family Doctor:		Doctor's Phone #:						
I give consent for the teacher/supervi				<b>re</b> for my chi	ld if neede	d and I understand that the scho	ol	
Please check either	Yes	or	No					
Is there any medical background which	n might affec	t this stud	ent's comfo	rt or safety d	luring this	activity?		
Please check either	Yes	or	No					
Please give details of any medical histo student's teacher/supervisor at the screquired)								

## **ELEMENTS OF RISK NOTICE**

The risk of injury exists in every out of school activity. Falls, collisions and other incidents may occur and cause injury. Due to the very nature of some activities, the risk of injury may increase. Injuries may range from minor sprains and strains to more serious injuries affecting the head, neck or back (i.e., concussion). Some injuries can lead to paralysis or prove to be life-threatening. These injuries result from the nature of the activity and can occur without fault on either the part of the student, or the school board or its employees or agents or the facility where the activity is taking place. The chances of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity. The Hastings and Prince Edward District School Board attempts to manage as effectively as possible the risk involved for students while participating in school athletics.

Examples of risk in this particular activity are:

## **ACCIDENT INSURANCE NOTICE**

The Hastings and Prince Edward District School Board does expenses insurance on behalf of student's participating in t responsibility for additional health and accident insurance. S school year are advised to purchase Student Accident Insur	hese activities. Parents/Guardians and Students planning to participate in ath	d students are advised that it is their aletic activities and events during the
understand and accept the expectations listed above.		
	Student's Signature	Date
have read and understand the Elements of Risk Notice and inherent in the requested activity and assume responsibility coverage.		
agree that the Hastings and Prince Edward District School to my child or loss or damage to personal property arising fr consent to this student's participation in the learning activ	om, or in any way resulting from partic	
	Parent/Guardian Signature	 Date

This information is collected under the authority of the Education Act and in compliance with the Municipal Freedom of Information and Protection of Privacy Act. It will be used for the purpose of athletic activities. If you have any questions about this form, please contact the principal at the School.