Standard Field Trip Parent/Guardian Permission Form

School Name:	Field Trip Date:
Cortes	Monday March 16th

We will be travelling to (field trip destination):
Klahoose Hatchery - Basil Creek

Departure Time (from school):	Departure Time (from destination):	Arrival Time (back to school):
9am	10:30	10:50

We will be travelling by:

- [x] Walking
- [ ] Public Transit
- [ ] Private Bus
- [ ] Private Vehicle
- [x] School Bus

Accommodation:

- [ ] Not Applicable
- [ ] Billet
- [ ] Hotel/Motel
- [ ] Camping
- [ ] Other _____

Students will be supervised by:

Adult/Student Ratio: 1:8

Teacher Supervisor(s): 2

** Middle and secondary aged students may not be supervised by an adult at all times.*

Students will need to bring:
Dress for the Weather

Field Trip Teacher Organizer(s):
Claudia Barnes

The educational objectives/purpose and trip details are:
Our K–1 class is excited to join local streamkeeper Christine Robinson on an educational visit to the Klahoose Hatchery and Basil Creek on March 16. Students will explore the salmon life cycle firsthand and learn how local stewardship helps protect and restore our watershed.
This experience connects directly to the coho eggs and salmon currently growing in our Schools tank. Seeing the hatchery operations up close will help students deepen their understanding of salmon development, habitat needs, and the importance of caring for our local ecosystems.

Parent/Guardian Permission – Please Complete Below:
Accidents can be the result of the nature of the activity and can occur with or without fault on either the part of the student, or the school district 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, _____, the parent or guardian of _____
(parent's name – please print) (student's name – please print)

give my permission for him/her to take part voluntarily in the above mentioned activity. I understand that my child may be exposed to certain risks while participating in this activity. Accidents and injuries may occur and I am aware of the method of travel as outlined above. My child and I also understand that the school's Code of Conduct applies during this field trip. I will be responsible for any costs caused by my child's failure to abide by the Code of Conduct, including any costs to send my child home.

_____
(signature of parent/guardian)

My child has no illnesses or allergies or disabilities that may require special attention, except as described here: _____

_____

If you do not wish your child to accompany his/her class on this trip, please contact the field trip's teacher organizer(s) listed above who will arrange alternate supervision.

Volunteer Drivers Only – Please Complete Below:

I, _____, state that I have a current criminal record check and current driver's abstract on file at the
(driver's name – please print)
school and have no moving violations, no impaired driving charges or criminal charges related to a motor vehicle in the past two years. My vehicle is legally equipped to transport _____ passengers and maintains a minimum of $1,000,000 third party liability insurance. Note: if your vehicle has the capacity to transport more than 10 people, including the driver, a minimum of $10,000,000 third party liability insurance is required.

_____ _____
(date) (signature of driver)