



Educational Excursions Form

Parent/Guardian Consent, Acknowledgement and Authorization

This form is to be completed by a parent or guardian to provide consent, acknowledgement and authorization for a student to participate in Sask DLC educational excursions.

1. Student Information

Student First Name	
Student Last Name	
Grade	
Campus	

2. Parent/ Guardian Information

First Name	
Last Name	
Primary Phone #	
Email	
Relationship to the Student	
Are you an emergency contact for the student?	<input type="checkbox"/> Yes <input type="checkbox"/> No If "No", please provide emergency contact's information below
Emergency Contact's Full Name	
Emergency Contact Phone #	

3. Student Code of Conduct and Behaviour Expectations

I acknowledge and agree that it is the student's responsibility to comply with the [Sask DLC Student and Family Code of Conduct](#) and any rules or expectations established for Sask DLC educational excursions.



I agree my child will follow [Sask DLC's Student and Family Code of Conduct](#) and the trip rules, and if applicable, the laws and rules of the country and all places to which this student travels.

I understand that if my child violates the Sask DLC Student and Family Code of Conduct and/or trip rules, they may be sent home at my expense, and I agree to cover any associated costs.

I agree to accept full responsibility for any damage, injury or loss caused to persons or property arising from the conduct of my child.

4. Health Information

List any medical information relevant to the student, including allergies, medical conditions, names and dosages of any prescription or non-prescription medications. If no relevant information, please enter N/A for not applicable.

5. Accessibility Needs and/or Disability Considerations

Describe any relevant accessibility needs or disability considerations of the student. This information will be used to plan the excursion:

6. Confirmation of Physical Fitness

I understand that there are potential risks associated with the travel and the physical demands of the trip and I confirm that this student is physically fit to participate in the trip and all activities planned during the trip.

7. Emergency Medical Authorization

In the event of an emergency, I authorize the teacher or group leader(s) to obtain emergency medical advice and services for the student when:

- the student's health or well-being is at risk;
- medical advice or treatment is required and guardian consent would normally be required;
- all reasonable attempts to contact the guardian have been unsuccessful; or
- the nature of the emergency requires immediate action and there is insufficient time to contact the guardian.



The teacher or group leader(s) shall use their discretion to take reasonable steps necessary to ensure the welfare and safety of the student.

Yes, I give permission

No, I do not give permission

8. Transportation Arrangements

Sask DLC does not provide transportation to and from educational excursions. All transportation arrangements remain the sole responsibility of families. Sask DLC staff do not assess, approve or supervise private transportation arrangements.

I acknowledge that I am responsible for arranging and managing all transportation to and from educational excursions.

9. Supervision

To ensure safe and well-supervised experience for all students, we require parents/guardians to provide supervision of their child/children and to comply with Sask DLC procedures during the educational excursion.

I acknowledge that I am responsible to ensure adequate supervision of my child/children during the educational excursion.

10. Media Release/ Permission to Publish

Sask DLC requests permission to film and/or photograph your child/children and to retain the footage and/or photographs in Sask DLC's library of images.

These may be used for an indefinite period of time by Sask DLC or Government of Saskatchewan purposes, including but not limited to communication with Sask DLC staff, students and families, publications and advertising in print and/or digital formats, as well as posting on open access websites and social media channels.

When posting, Sask DLC adheres to the requirements prescribed in *The Freedom of Information and Privacy Act* (FOIP) and will only identify students by their first name.

Yes, I give permission for the above

No, I do NOT give permission for the above

11. Liability Waiver

I acknowledge that Sask DLC, its employees, servants, or agents shall not be liable for any injury that this student may suffer or loss/ damage to personal property arising from participation in this trip or related activities, except where such injury, personal property loss or damage is caused solely from their negligence while acting within the scope of their duties.



12. Consent and Acknowledgement

I have read the details of the educational excursion. I hereby acknowledge that I have taken steps to inform myself as fully as possible concerning the details of the trip my child will be taking and of the dangers facing participants of such trips, including the risk of physical injury. I understand that there may be potential risks associated with the travel and the physical demands of the trip and I hereby warrant that this student is physically fit to participate in the trip and all activities planned during the trip. I agree that I will accept full responsibility for any damage, injury or loss caused to person or property arising from the conduct of my child.

As the parent/guardian of the above-mentioned student who is participating in the educational excursion:

- I declare that I have read and understood the above information in its entirety and hereby agree to participate acknowledging the foregoing.
- I confirm that I have provided all required information to the teacher or group leader(s) and hereby give my consent for this student to participate in the trip, including travel, and to be under teacher or group leader(s) care and supervision for the duration of the trip.
- I acknowledge that I have explained the above information to the participating student.

13. Signature

Parent/ Guardian
Signature

Date (mm-dd-yyyy)
