

# Walnut Park Elementary School

P.O. Box 2649, Smithers, British Columbia V0J 2N0  
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Dwayne Anderson  
Principal

Karolina Bolton  
Vice Principal

## FIELD TRIP PERMISSION FORM

DESCRIPTION OF ACTIVITY: **Skating at Public Arena.**

LEARNING OBJECTIVES: **Physical Education/Fitness**


DATE & TIME: **9:00-10:15 - Thursday, January 12, 19, 26 and February 2**

TRANSPORTATION: **Walking**

SUPERVISING TEACHERS: **Ms. McIntyre**

VOLUNTEERS: Please indicate below if you are able to help.

EMERGENCY CONTACT: **Dwayne Anderson, Principal 250 847-4464**

Field Trip approval: 

ADDITIONAL INFORMATION:

**HELMETS and mitts ARE MANDATORY FOR ALL SKATERS.**

Bike helmets will work. There are a few skates and helmets available to borrow at the rink if required.

(Please detach and return the permission slip below.)

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DATE & TIME: **9:00-10:15 -Thursday, January 12, 19, 26 and February 2**

TRANSPORTATION: **walking**

SUPERVISING TEACHERS: **Ms. McIntyre**

In signing this permission form, I indicate that I understand the nature of the activity and its inherent risks and approve of the arrangements outlined above. I give my permission for my son/daughter/ward to participate.

Date: \_\_\_\_\_  
Name of son/daughter/ward \_\_\_\_\_

Signature of parent/guardian \_\_\_\_\_  
telephone number \_\_\_\_\_

My child has skates Yes \_\_\_\_\_ No \_\_\_\_\_ Child's shoe size for arena skates \_\_\_\_\_

I am willing to accompany the class and help with supervision. Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please indicate the date(s) you are able to help \_\_\_\_\_

If your child has any medical problems or allergies we should be aware of, please indicate below:

In case of emergency with my child, please contact: \_\_\_\_\_ at \_\_\_\_\_  
Name phone number