

FIELD TRIP PARENT PERMISSION

DETAILS OF TRIP:

Teacher Contact: Michael Ross, iGen District Teacher Sponsor	
Destination of Trip: Multiple destinations, dates and locations as follows: February 1st – Okanagan Regional Library, February 27th - Hollywood Road Education Services and possibly May 8th or May 9th – Hollywood Road Education Services and June 13th at the Okanagan Innovation Centre.	
Purpose of Trip: Innovation Generation Challenge	
The Innovation Generation (iGen) Challenge connects budding young entrepreneurs (Gr. 7-12) with the marketplace in a way never seen before. By connecting young entrepreneurs with community business members, we are uncovering the next breed of business gurus in the Central Okanagan!	
Inherent Risks of Participating: Travel to and from destinations listed above	
Group of Students: Grade 7 - 12 students	
No. of Students:	No. of Teacher Supervisors:
Departure Date: listed above in destination	Arrival Time: Varies, refer to calendar of events at http://www.igc23.com/
Return Date: same as departure date	Departure Time: Varies, refer to calendar of events at http://www.igc23.com/

TRANSPORTATION:					
School District Bus	[]	Wheelchair Access	[]	Private Vehicle	[x]
Rented Vehicle	[]	Commercial Carrier	[]	Foot/Bicycle	[]
District Driver	[]	Authorized Adult	[]	Commercial Driver	[]
Authorized Student Driver (no passengers allowed)	[x]	Parent/Guardian	[x]		

PARENT/GUARDIAN CONSENT:

I have read the description of activities, understand that there may be inherent risks attached to this activity and accept these risks. I also understand that all of the requirements of the school Code of Conduct apply while students are on field trips, and I will repay the school for costs if it is necessary to send this student home by means other than as stated above.

Consent is given for my son/daughter to participate, travel as described, and possibly appear in the media.

Student Name: _____ Student's BC Medical # _____

Medical concerns, allergies, medication requirements _____

Signature of student: _____ Date _____

Signature of parent: _____ Date _____