Jarvis Traditional Elementary School

7670 118th Street
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Delta District Web Site: http://www.deltasd.bc.ca Jarvis Web Site: ja.deltasd.bc.ca

Respect • Integrity • Excellence

May 31, 2019

Dear Parents/Guardians:

The students of Divisions 18, 19 & 20 are planning the following field trip:

Destination and/or itinerary:	Stanley Park Vancouver, BC
Teacher(s) in charge:	Ms. LaRose, Ms. McGinley, Ms. Bryjack
Date:	**Tuesday, June 18**
Departure Time:	8:30 am
Returning Time:	3:00 pm
Transportation arrangement:	Bus
Cost:	Free

The total cost of this field trip is free as funding has been provided by the GO Grant (HCTF Education).

We will be leaving the school at 8:30am and returning by 3:00pm. Please send a snack and lunch with your child in a _**disposable bag/container**_. We will be going rain or shine, so please make sure that your child is dressed appropriately for the weather. Also, make sure they he/she is wearing comfortable shoes (or boots if it's raining). We will be taking part in the Beach Explorers program at Lumberman's Arch for half of the day and doing an activity filled nature walk for the other half.

Please complete the permission slip below and return it to the school no later than **Tuesday, June 11th.**

Sincerely,

Ms. LaRose
Classroom Teachers

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PLEASE CUT OFF AND RETURN TO TEACHER BY TUESDAY, JUNE 11, 2019

❒   I(We) give permission for my/our child, _____, Div. _____ to participate in the field trip.

> I/We understand that supervision will be provided by the school. Accidents can be the result of the nature of the activity and can occur without any fault on either part of the student, or the school board, or its employees or agents, or the facility where the activity is taking place. By allowing my child to participate in this activity, I am accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for my child.

Possible medical problems: _____nil, or _____
Medication and Dosage _____

_____   _____   _____
Printed name of Parent/Guardian   **Signature of Parent/Guardian**   **Date**

Delta School District
Inspired Learning