

Grade 7 Airdrie Band Trip

Dear Grade 7 Band Families,

Despite the sudden and unfortunate cancellation of the Science Trip, the Band Trip is still a go. We just got final confirmation on the times to perform at the Airdrie Rotary Festival of the Performing Arts, and can now get consent forms completed.

Please turn in these forms by March 5, 2018, and submit the \$30 fee for participation by March 16, 2018.

We are also in need of 5 chaperones for this trip. If you are able to help out, please fill out the Chaperone Information Form also attached to this package.

Thank you for your support!



Joel Windsor, MME, RMT

Itinerary

March 22, 2018 - Music Students Only

Time	Activity
8:15 AM	Depart NDC by bus. Ensure students arrive on time.
9:15 AM	Arrival in Airdrie, check into the Festival
9:40 AM	Warmup Room
10:00 AM	Perform
10:20 AM	Workshop
10:40 AM	Listen in the Audience
11:30 AM	Depart for Lunch
12:30 PM	Arrive at Genesis Place for Swimming
2:30 PM	Depart Genesis Place
3:30 PM	Arrive back at NDC. PSTIs in the evening.

What Music Students Should Bring

- Work to do on the bus
- Bag lunch or cash for the Fast Food lunch
- Pencil
- Swimwear (have a conversation with your student about what is appropriate)
- Musical Instrument (in working order)
- Sheet Music and Music Folder
- Uniform (Jacket provided, white undershirt with no logos, black pants)

Transportation provided by Good Company Travel of High River, AB.

For More Details

For complete details on this and other trips, visit

<http://music.ndcfinearts.ca>

INFORMED CONSENT/PERMISSION FORM FOR EDUCATIONAL FIELD TRIPS

Christ the Redeemer Catholic Schools is arranging to bus Notre Dame Collegiate students to the Airdrie Rotary Festival of the Performing Arts in Airdrie on March 22, 2018.

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.

ELEMENTS OF RISK:

Educational activity programs such as Band Camps involve certain elements of risk.

Injuries may occur while participating in these activities. The following list includes, but is not limited to examples of the types of injury, which may result from participating in the Airdrie Rotary Festival of the Performing Arts in Airdrie on March 22, 2018.

- Vehicle breakdown
- Vehicle accident
- Personal injury

The risk of sustaining these types of injuries result from the nature of the activity and can occur without fault of either the student, or the school board, its employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured.

The chance of injury occurring can be reduced by carefully following instruction at all times while engaged in the activity.

If you choose to participate in the Airdrie Rotary Festival of the Performing Arts in Airdrie on March 22, 2018, you must understand that you bear the responsibility for any injury that may occur.

Christ the Redeemer Catholic Schools does not provide accidental death, disability or dismemberment or medical expense insurance on behalf of the student participating in this activity.

Due to a policy change by the Board, permission given by a parent over the phone will no longer be accepted. Your child must return the signed permission slip below in order to participate. Please note that, should you wish your child not to participate in this activity, alternative educational arrangements will be made for them at the school.

ACKNOWLEDGEMENT

WE HAVE READ THE ABOVE. WE UNDERSTAND THAT BY PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO. FURTHERMORE, WE AGREE TO ABIDE BY THE GUIDELINES OF THIS TRIP AS THEY WILL BE ARTICULATED SHORTLY BEFORE THE BAND TRIP.

Signature of Student: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

PERMISSION

- I give _____ permission to participate in the Airdrie Rotary Festival of the Performing Arts in Airdrie on March 22, 2018.
- I do not give _____ permission to participate in the Airdrie Rotary Festival of the Performing Arts in Airdrie on March 22, 2018.

Signature of Parent/Guardian: _____ Date: _____

Medical Report

Student Name: _____ Alberta Health Care No.: _____

Travel / Medical Insurance Provider and Tracking Number: _____

Common medications will be available on the excursion to administer to your student should they need it. However, before we can administer these medications, we must have their parent/guardian's permission to do so. **It is very important that you fill out this information completely.** The uses listed are the only uses the medication would be used for, even if other side effects can occur. For example, Benedryl will only be used as an antihistamine, not as a sedative.

	Medication	Possible Uses
<input type="checkbox"/>	Advil	Headaches
<input type="checkbox"/>	Tylenol	Headaches, muscle aches
<input type="checkbox"/>	Benedryl	Antihistamine
<input type="checkbox"/>	Gravol	Relieve nausea or vomiting
<input type="checkbox"/>	Hydrocortisone	Itching, insect bites, rashes
<input type="checkbox"/>	Burn Cream	Relieve minor skin burns
<input type="checkbox"/>	Polysporin	Disinfect cuts or scrapes

Please list any allergies the student may have, be they environmental or pharmaceutical, and treatment for them.

Please list any medications the student is currently taking, and for what conditions they are taking it.

Parent Contact Information

Parent Name: _____ Parent Name: _____

Cell Phone: _____ Cell Phone: _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Email: _____ Email: _____

Chaperone Availability

If you are available as a chaperone, please fill out the information below. The first chaperones to submit forms will be the first selected to participate. **Please also fill out the Chaperone Medical Form.**

First Chaperone's Name: _____ Gender (circle one): Male Female

Second Chaperone's Name (if applicable): _____ Gender (circle one): Male Female

Chaperone Medical Report

Chaperone Name: _____ Alberta Health Care No.: _____

Travel / Medical Insurance Provider and Tracking Number: _____

Common medications will be available on the excursion to administer to your student should they need it. However, before we can administer these medications, we must have their parent/guardian's permission to do so. **It is very important that you fill out this information completely.** The uses listed are the only uses the medication would be used for, even if other side effects can occur. For example, Benedryl will only be used as an antihistamine, not as a sedative.

Medication	Possible Uses	Please list any allergies you may have, be they environmental or pharmaceutical, and treatment for them.
<input type="checkbox"/> Advil	Headaches	_____
<input type="checkbox"/> Tylenol	Headaches, muscle aches	_____
<input type="checkbox"/> Benedryl	Antihistamine	_____
<input type="checkbox"/> Gravol	Relieve nausea or vomiting	_____
<input type="checkbox"/> Hydrocortisone	Itching, insect bites, rashes	_____
<input type="checkbox"/> Burn Cream	Relieve minor skin burns	_____
<input type="checkbox"/> Polysporin	Disinfect cuts or scrapes	_____

Please list any medications you are currently taking, and for what conditions you are taking it.

Second Chaperone Medical Report

Chaperone Name: _____ Alberta Health Care No.: _____

Travel / Medical Insurance Provider and Tracking Number: _____

Common medications will be available on the excursion to administer to your student should they need it. However, before we can administer these medications, we must have their parent/guardian's permission to do so. **It is very important that you fill out this information completely.** The uses listed are the only uses the medication would be used for, even if other side effects can occur. For example, Benedryl will only be used as an antihistamine, not as a sedative.

Medication	Possible Uses	Please list any allergies you may have, be they environmental or pharmaceutical, and treatment for them.
<input type="checkbox"/> Advil	Headaches	_____
<input type="checkbox"/> Tylenol	Headaches, muscle aches	_____
<input type="checkbox"/> Benedryl	Antihistamine	_____
<input type="checkbox"/> Gravol	Relieve nausea or vomiting	_____
<input type="checkbox"/> Hydrocortisone	Itching, insect bites, rashes	_____
<input type="checkbox"/> Burn Cream	Relieve minor skin burns	_____
<input type="checkbox"/> Polysporin	Disinfect cuts or scrapes	_____

Please list any medications you are currently taking, and for what conditions you are taking it.
