

Junior Band Camp

Hello Grade 8/9 Band Families!

We have our details for our Band Camp taking place on March 8 and 9, 2019!

This camp takes place at Alberta Pioneer Camps, particularly the location west of Sundre, Alberta. The trip includes focused sectional instruction on the students' instruments and a guest conductor to work with as well, along with a very unique camp experience with a variety of fun activities including wall climbing, archery, orienteering, wagon rides, campfires and a large-scale game of Predator and Prey. The details are as follows;

Dates: March 8 and 9, 2019

Leaving early morning on March 8, back late evening on March 9.

Fee: \$125.00 – Due February 15, 2019

Payments are made using SchoolCashOnline at <https://christtheredeemer.schoolcashonline.com/>. If arrangements need to be made, please contact Janet Bennett at the front office at 403-652-2231 or jbennett@redeemer.ab.ca.

Deadline for Consent Form – January 25, 2019

Rooming Assignments are made after the Consent Form Deadline.

EXTREMELY IMPORTANT – WE NEED 8 CHAPERONES

Last year we cancelled our band camp due to a lack of parent volunteers. Parents do not need to pay any fees. Accommodations, transportation and food are provided. We really like providing these once-in-a-lifetime experiences for our students, but parent volunteers are required to make it possible. We would prefer at least 2 male chaperones and at least 4 female chaperones, but still need a total of 8 chaperones. Please indicate your availability below.

Questions

Please direct questions to Mr. Windsor at jwindsor@redeemer.ab.ca.

Chaperone Availability

If you are available as a chaperone, please fill out the information below as well as the opposite side of this page. The first chaperones to submit forms will be the first selected to participate.

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

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

INFORMED CONSENT/PERMISSION FORM FOR EDUCATIONAL FIELD TRIPS

Christ the Redeemer Catholic Schools is arranging to bus Notre Dame Collegiate students to the Pioneer Ranch west of Sundre, Alberta for a band camp on March 8 and 9, 2019.

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 our visit to the Pioneer Ranch west of Sundre, Alberta for a band camp on March 8 and 9, 2019.

- 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 visit to the Pioneer Ranch west of Sundre, Alberta for a band camp on March 8 and 9, 2019, 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 trip to the Pioneer Ranch west of Sundre, Alberta for a band camp on March 8 and 9, 2019.
- I do not give _____ permission to participate in the trip to the Pioneer Ranch west of Sundre, Alberta for a band camp on March 8 and 9, 2019.

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: _____

For More Details

For complete details on this and other trips, visit

<http://music.ndcfinearts.ca>

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.
