

Senior Winds Band Trip, May 12-14, 2018

Dear Families,

On May 12-14, 2018, our Senior Wind Ensemble will be workshopping with Dr. Daryl Price at the University of Alberta and attending the Alberta Band Association's Festival of Bands performing 3 pieces, playing in a sight-reading clinic, and showcasing their hard work this year. The itinerary is attached.

The good news is that students will only miss a single school day. Transportation will be by way of our school's activity bus, driven by Helen Low, a parent of one of our Grade 7 students.

Please return this form by Friday, May 4, 2018. If you have not submitted fees, please remit them by Friday as well. The fee for this trip is \$300, covering the cost of transportation, entertainment, accommodations, breakfasts, guest conductor fees and the festival fees.

I am looking for one female chaperone to be on this trip, so if you can assist with this trip, please let me know, and also fill in the chaperone information sheet.

Thanks! This should be a fun 3-day trip!

Peace,

Joel Windsor, MME, RMT

Please Bring

- Black pants and black shoes (dressy), white button-up dress shirt
- Nightwear for two evenings.
- Change of clothes for two overnights.
- Cash for 3 lunches and 3 suppers (students can bring a bag lunch for the bus ride up instead if they wish)
- Swimsuit (if going swimming, either at the hotel or at the World Waterpark)
- Working Instrument (including all mallets, a snare drum, and percussion accessories)
- Sheet Music
- Pencil
- Homework
- Any medication required

Senior Winds Trip Itinerary

May 12, 2018

Time	Activity	Location
8:30 AM	Depart Notre Dame Collegiate	High River, AB
12:30 PM	Arrival at West Edmonton Mall	Edmonton, AB
7:00 PM	Waterpark and Galaxyland close	Edmonton, AB
7:30 PM	All eat together on Bourbon Street	Edmonton, AB
9:00 PM	Check into Ramada Hotel	Edmonton, AB
10:00 PM	Evening Liturgy, then Quiet Time	Edmonton, AB

May 13, 2018

Time	Activity	Location
7:00 AM	Wakeup Call	Edmonton, AB
7:45 AM	Depart the Hotel	Edmonton, AB
8:00 AM	Arrive at St. Joseph's Basilica for Mass	Edmonton, AB
8:30 AM	Mass	Edmonton, AB
10:00 AM	Depart Mass	Edmonton, AB
10:30 AM	Arrive at U of A, Workshop with Dr. Price	Edmonton, AB
Noon	Lunch	Edmonton, AB
1:00 PM	Workshops, Sectionals with Dr. Price	Edmonton, AB
4:00 PM	Depart for the Mall	Edmonton, AB
4:30 PM	At Mall, Galaxyland and Waterpark close at 6, so better to shop	Edmonton, AB
6:00 PM	Dinner on Bourbon Street	Edmonton, AB
8:00 PM	All of us at Ed's Bowling	Edmonton, AB
9:30 PM	Return to Hotel	Edmonton, AB
10:00 PM	Back at hotel, Quiet Time	Edmonton, AB

May 14, 2018

Time	Activity	Location
8:30 AM	Wakeup Call	Edmonton, AB
9:30 AM	Checkout and Depart Hotel	Edmonton, AB
10:00 AM	Free Shopping Time (don't forget a late lunch)	Edmonton, AB
2:00 PM	Depart Edmonton	High River, AB
4:00 PM	Arrival at Red Deer College, settle in	Red Deer, AB
4:30 PM	Listen to a Band	Red Deer, AB
5:00 PM	Warm-up	Red Deer, AB
5:30 PM	Performance on Stage	Red Deer, AB
6:00 PM	Adjudication	Red Deer, AB
6:30 PM	Sight-Reading Clinic	Red Deer, AB
7:00 PM	Dinner in Gasoline Alley	Red Deer, AB
7:45 PM	Depart Red Deer	Red Deer, AB
10:00 PM	Return to NDC, unload, disembark.	High River, AB

INFORMED CONSENT/PERMISSION FORM
FOR EDUCATIONAL FIELD TRIPS

Christ the Redeemer Catholic Schools is arranging to bus Notre Dame Collegiate students to the University of Alberta in Edmonton, Alberta and the Alberta Band Association Festival of Bands in Red Deer, Alberta on May 12-14, 2018, herein referred to as the Senior Winds Trip.

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 Senior Winds Trip.

- 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 Senior Winds Trip, 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 Senior Winds Trip.

I do not give _____ permission to participate in the trip to the Senior Winds Trip.

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.

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<input type="checkbox"/>	Benedryl	Antihistamine
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<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.

Emergency 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

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