

**APPENDIX L PARENTAL PERMISSION FOR A CO-CURRICULAR ACTIVITY****PARENTAL PERMISSION FOR A CO-CURRICULAR/ATHLETIC ACTIVITY**

Student: \_\_\_\_\_ School: FALLINGBROOK PUBLIC SCHOOL  
Date of Birth: \_\_\_\_\_ Family Doctor: \_\_\_\_\_  
Address: \_\_\_\_\_ Ontario Health Card Number (Voluntary): \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_ Teacher/Volunteer in Charge S. Holland, K. Hosier

Dear Parent(s) or Guardian(s):

Your son/daughter has indicated an interest in the inter-school co-curricular/athletic activity designated below. There are a great many physical, mental and social benefits to be gained through this participation. Your consent is required before he/she will be allowed to participate. Your signature(s) on this form will indicate your approval.

**YOU ARE URGED TO CONSULT WITH YOUR FAMILY DOCTOR PRIOR TO YOUR SON/DAUGHTER PARTICIPATING IN INTER-SCHOOL ATHLETIC ACTIVITIES.**

If your son/daughter has, or has had, any previous or current health problems which might affect his/her comfort or safety, would you please give full particulars in writing and telephone the teacher to discuss the problem. Please provide particulars.

ACTIVITY: Cross country team @ Lakeridge Ski Resort.

TENTATIVE SCHEDULE:

I hereby give my consent for \_\_\_\_\_  
(Name of Student)

to participate in the activity indicated above.

October 2, 2019  
(Date)

\_\_\_\_\_  
(Signature of Parent/Guardian)

Elements of Risk

Co-curricular/athletic programs may present various elements of risk. Incidents related to such activities may occur and cause injury through no fault of the school board or the facility at which the activity or event is being held. Participants must assume these risks.

The Durham District School Board does not provide any accidental death, disability, dismemberment or medical expenses insurance on behalf of students participating in these activities. Students planning to become involved in co-curricular athletic programs, at any time during the school year, are urged to have Student Accident Insurance.

**Acknowledgement**

**We have read and understand these warnings:**

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Student)

\_\_\_\_\_  
(Signature of Parent/Guardian)

**Transportation**

A variety of methods of transportation may be used when students are participating in games at other schools. When bus costs are prohibitive, your son/daughter may be driven by the coach, a teacher, a parent, a senior student or by local taxi. Students will be expected to use the method of transportation provided by the school for each event, unless arrangements have been made with the department head one day in advance and written approval is obtained from the parent or guardian. If your son/daughter is a licensed driver and has your permission to transport other students to games or tournaments, please indicate below.

**Insurance**

When a parent or senior student volunteers to provide transportation to a school sponsored event, The Durham District School Board does provide coverage in excess of the liability insurance held by the volunteer. (This does not and cannot cover the collision portion of the volunteer's insurance coverage.)

\_\_\_\_\_  
is a licensed driver and has permission to drive to games/tournaments and transport student passengers.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Parent/Guardian)