





# St. Matthew's Elementary School

16065 88<sup>th</sup> Ave., Surrey, B.C. V4N 1G3  
Phone: 604-589-7545 Fax: 604-589-7113

## CONSENT AND ACKNOWLEDGEMENT OF RISK

### Destination/Activity/Program: **Grade Six (Junior) Girls Basketball Games**

1. I acknowledge my right to obtain as much information as I require about this program or activity and associated risks and hazards, including information beyond that provided to me by the school or board.
2. I freely and voluntarily assume the risks/hazards inherent in the program/activity and understand and acknowledge that my child may suffer personal and potentially serious injury arising from his/her participation.
3. My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service provider's administrators, instructors, and supervisors over all phases of the program/activity.
4. In the event my child fails to abide by these rules and regulations, disciplinary action may require his/her exclusion from further participation, or that I be contacted to have him/her picked up, unless I have specified other transport arrangements.
5. I acknowledge that it is my responsibility to advise the Lead Teacher of any medical and/or health concerns of my child that may affect his/her participation in the stated program or activity.
6. I acknowledge that the trip supervisors may secure transport to emergency medical services as they deem necessary for my child's immediate health and safety, and that I shall be financially responsible for such services.
7. Based on my understanding, acknowledgement, and consents as described herein,

(Name of Student) \_\_\_\_\_ has my permission to participate and travel by parent vehicles to away basketball games.

**Yes**, (I signed up) or  **No**, (I do not wish to sign up) for the REMIND APP – **Girls Basketball Season** – This will be used to communicate schedules, schedules changes, and any other basketball updates. To sign up, either text the message @bkk682 to the number (778) 654-5548 **OR** enter the following link into a web browser on your smart phone (ie. Google): [rmd.at/bkk682](http://rmd.at/bkk682). (This is intended for parent communication).

I am available to drive to and from the following schools:

|          |         |                    |      |                 |                    |     |      |    |      |
|----------|---------|--------------------|------|-----------------|--------------------|-----|------|----|------|
| Thursday | Jan. 25 | Gr. 6 Girls & Boys | Away | St. Catherine's | (Girls play first) | Yes | ____ | No | ____ |
| Tuesday  | Jan. 30 | Gr. 6 Girls        | Away | Star of the Sea |                    | Yes | ____ | No | ____ |

I have \_\_\_\_ available seats with seat belts in my vehicle.

**Yes** **OR**  **No** - I have completed the CRC (Criminal Record Check) process for 2017/2018. If NO, the school office will contact you. Families are asked to complete this process in order to help drive to Field Trips and Sports Events.

\_\_\_\_ Yes, I would prefer to drive my own child to away games.

- Yes, I have included the WINTER ATHLETIC FEE of \$10 with this consent form.**
- I already included the WINTER ATHLETIC FEE with the preseason consent form.**

Name (Please print): \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

PLEASE RETURN THIS PAGE BY DECEMBER 18<sup>TH</sup>