



Father Michael Troy Catholic Junior High School

3630 23 St NW
Edmonton AB, Canada T6T 1W7
780-471-1962

Local Field Trip Parent Permission Letter

Field Trip Name Visit to Strathcona Wilderness Centre

Field Trip Activity HIKING AND OUTDOOR GAMES

Location / Destination Strathcona Wilderness Centre
52535 Range Rd 212, Uncas, AB T8G 2E9

School Travelling With _____

After you have carefully read this letter, we ask that you sign and return **only the** "Parental Consent" portion to the school (the last page in this document). Please keep the remainder for your information and records.

Field Trip Details

Grade 8 and 9 Environmental Stewardship/Outdoor Education students will get to experience morning trail hikes and a campfire with an afternoon game of predator versus prey. Students are expected to bring their own packed lunch and water bottles. Weather appropriate clothing will also be required - dress in layers. Please also bring bug spray and sunscreen.

Date of Field Trip	Start: <u>Oct 2, 2026</u>	Time of Departure	<u>8:45am</u>
	End: <u>Oct 2, 2026</u>	Time of Departure from Venue	<u>2:15pm</u>
		Time of Return	<u>3:00pm</u>
Cost	<u>\$25.00</u>		

Program of Studies Specific Outcomes

OUTDOOR EXPEDITIONS: Students will demonstrate skill, judgment, confidence and sensitivity in a wide range of environmentally responsible activities in outdoor settings.

OUTDOOR CORE: Students will demonstrate basic knowledge, skills and attitudes necessary for safe, comfortable, outdoor experiences in all seasons.

PERSONAL AND GROUP DEVELOPMENT: Students will demonstrate understanding, respect and appreciation for self and others.

Grades Attending 8, 9

Course(s) Student(s) Registered In

Number of Attending Students 46

Number of Attending Administrators

Number of Attending Teachers 2

Number of Non-Teaching School Staff 0

Number of Attending Volunteers 0

**Lead Teacher & Subject(s)
Taught and Contact**

**Attending Administrators, Teachers & Subject(s) Taught, Supervisors and
Volunteers**

Sara Nestorovich (T)

Communication Plan

The principal will be advised of any accidents, problems, unusual incidents or weather related concerns that may occur during the field trip. As well parents guardians will be contacted if health issues, injuries, or student conduct are a concern with their children.

Method of Transportation Yellow School Bus

Carrier Name Cunningham

Clothing Required

Weather appropriate clothing will be required. Dress in layers.

Other Information

Students are expected to bring their own packed lunch and water bottles.

Risks - Inherent, special or unusual risks associated with the field trip

All manner of injuries including but not limited to sprains, torn muscles and/or ligaments, fractures or broken bones, cuts, eye damage, scrapes, wounds, abrasions and/or contusions, oxygen shortage, head, neck, and/or spinal injuries.

All manner of head, neck, spinal, facial, eye, nose and/or dental injuries.

All manner of injuries and/or death which may result in the transportation to and from the facility.

NATURE WALK

All manner of injuries including but not limited to sprains, torn muscles and/or ligaments, fractures or broken bones, cuts, eye damage, scrapes, wounds, abrasions and/or contusions, oxygen shortage, head, neck, and/or spinal injuries.

All manner of head, neck, spinal, facial, eye, nose and/or dental injuries.

Weather related risks such as freezing temperatures, high winds, snow, ice, sleet, rain, fog, thunder storms, lightning, sunny/hot conditions.

All manner of injuries resulting from forces of nature, accident, hazards of participating in outdoor activities and sports including activities and sports taking place on or near water, illness, allergic reactions and all other manner of injury related to the program activities.

All manner of injuries resulting in muscular and soft tissue injuries including bruises, scrapes, cuts from collisions with the wall, floor, uneven playing surfaces, contact with other participants.

All manner of injuries resulting in dislocations, concussion, whiplash, contusions, sprains, pulled or strained muscles, knee injuries and broken bones.

All manner of injuries and/or death which may result in the transportation to and from the facility.

HIKING

Weather related risks such as freezing temperatures, high winds, snow, ice, sleet, rain, fog, thunder storms, lightning, sunny/hot conditions.

Motor traffic exposures such as crossing streets and intersections, side walk bike traffic, high traffic

times, speeding vehicles, blind spots, crosswalks, railway crossings, bus stops, LRT, construction zones.

Slip/Trip/Fall exposures relating to road/sidewalk conditions, pot holes, trees, stairs, parking lots, ramps, elevators.

Close access to rivers, ponds and pools- drowning exposures.

Exposure to wildlife, animals and insects.

All manner of injuries and/or death which may result in the transportation to and from the facility.

CAMPING

All manner of injuries resulting from use of equipment, materials or facilities.

All manner of injuries resulting from forces of nature, accident, hazards of participating in outdoor activities and sports including activities and sports taking place on or near water, illness, allergic reactions and all other manner of injury related to the program activities.

All manner of burns associated with camp fires.

Weather related risks such as freezing temperatures, high winds, snow, rain, fog, thunderstorms, lightning, sunny/hot conditions.

Slip/Trip/Fall hazards such as slippery floors, holes in the fields, older buildings, stairs, water ponds onsite, muddy conditions, wet dock/deck surfaces, change rooms, running, horseplay.

All manner of injuries resulting from falling.

Cuts and abrasions resulting from contact with obstacles.

All manner of injuries resulting in muscular and soft tissue injuries including bruises, scrapes, cuts from collisions with the wall, floor, uneven playing surfaces, contact with other participants.

All manner of injuries resulting in dislocations, concussion, whiplash, contusions, sprains, pulled or strained muscles, knee injuries and broken bones.

All manner of head, neck, spinal, facial, eye, nose and/or dental injuries.

All manner of injuries and/or death which may result in the transportation to and from the facility.

Date Submitted for Approval Sep 16, 2026

Signatures



Principal (Signature)

K. SAGUNO

Print Name

Sept 21 / 26

Date



Lead Teacher (Signature)

C. MOORE

Print Name

Sept 21 / 26

Date

Fr. Michael Troy J.H. School

PARENTAL CONSENT

Parental Consent and Total Costs (if applicable) due by: **May 29, 2026**

Student Name _____ Grade _____

Field Trip Activity HIKING AND OUTDOOR GAMES Start Date Oct 2, 2026 End Date Oct 2, 2026

Location Strathcona Wilderness Centre
52535 Range Rd 212, Uncas, AB T8G 2E9

Method of Transportation Yellow School Bus

Please Indicate your fieldtrip payment method:

Online Payment for \$ _____

Additional Information / Explanation

MEDICAL CONDITION

The following is a list of my child's medical conditions (including allergies, conditions requiring medication, etc), a list of medication that my child must take and any special instructions regarding medication storage and administration.

I have reviewed and understand the information provided in this Parent Permission Letter, I consent to my child partaking in the field trip(s) as described in the Parent Permission Letter and I agree that this planned activity is acceptable. I also acknowledge and agree that during the planned field trip(s), _____ (name of student) is to act in accordance of the Education Act, Division policy and rules as to student conduct.

I understand that pursuant to Administrative Procedures 260, no parent shall be reimbursed for the loss of any field trip monies if the field trip is cancelled or interrupted for any reason. This includes any form of deposit. However, a parent shall be reimbursed field trip monies if the field trip is cancelled or interrupted and the school has not provided said monies at the time of cancellation to any third party travel-related agency which assisted in organizing the field trip, and the related contract between the district and the agency or the insurance provider permits a refund of field trip monies in the circumstances.

I understand and agree that where circumstances arise during the field trip, such as changes in itineraries or adverse weather or road conditions, the Lead Teacher, in consultation with the Principal, may make changes in itineraries and travel/arrival plans for my child. I understand that a reasonable effort will be made to advise me of such a change.

If my child requires medical attention, I authorize the supervisors to seek necessary medical treatment / intervention in the event of an emergency.

Parent signature: _____ Name _____ Date: _____

Relationship: ☐ Mother ☐ Father ☐ Other Legal Guardian

Emergency Parent Contact and Phone Number _____