EDMONTON CATHOLIC SCHOOLS

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	Fort Edmonton Park Field Trip
Field Trip Activity	VISIT TO A MUSEUM
Location / Destination	Fort Edmonton 7000 143 St NW, (Whitemud & Fox Dr) Edmonton, AB 780-442-5311
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

We are excited to take our Grade 7 students on a field trip to Fort Edmonton Park! This trip will give students the opportunity to explore Alberta's history through interactive exhibits, historical interpreters, and hands-on learning experiences. Please complete the permission form below and return it to your child's teacher by Friday, November 6, 2026.

Date of Field Trip	Start: Nov 9, 2026	**Time of Departure**	8:45 AM
	End: Nov 9, 2026	**Time of Departure from Venue**	2:20pm
		Time of Return	3:00PM
Cost	$33		

Program of Studies Specific Outcomes

Social 7.2 Students will demonstrate an understanding and appreciation of how the political, demographic, economic and social changes that have occurred since Confederation have presented challenges and opportunities for individuals and communities.

Grades Attending 7

Course(s) Student(s) Registered In

Number of Attending Students 120

Number of Attending Administrators

Number of Attending Teachers 4

Number of Non-Teaching School Staff 1

Number of Attending Volunteers 0

Lead Teacher & Subject(s) Taught and Contact Callum Moore (T)

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

Danielle Théberge (T), Kathleen Lewis (T), Sarah Fox (T), Callum Moore (T) and Kristi Hall-Busque (S)

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 Cunningham

Carrier Name Yellow - Cunningham Transport

Telephone # (780) 458-3255

Clothing Required

Events will be both indoors and outdoors so clothing should be applicable to the conditions.

Other Information

Students will have access to all stores and exhibits in the park. Spending money is optional. Lunches and snacks required also.

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

All manner of injuries resulting from slip/trip/fall

Exposures relating to road/sidewalk conditions, pot holes, trees, stairs, parking lots, ramps, elevators, escalators, water pools.

All manner of injuries associated with participation in planned activities during the field trip.

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

Motor traffic exposures such as crossing streets and intersections, side walk bike traffic, skate boarders, high traffic times, speeding vehicles, blind spots, crosswalks, railway crossings, bus stops, LRT, construction zones, etc.

Slip/Fall exposures with stairs, ramps, dark areas, seating.

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

Date Submitted for Approval Oct 9, 2026

Signatures

	K. SACKNO	13 OCT 2026
Principal (Signature)	**Print Name**	**Date**
	CALLUM MOORE	13 OCT 2026
Lead Teacher (Signature)	**Print Name**	**Date**

Fr. Michael Troy J.H. School

PARENTAL CONSENT

Parental Consent and Total Costs (if applicable) due by: Nov 6, 2026

Student Name _____ **Grade** _____

Field Trip Activity VISIT TO A MUSEUM Start Date Nov 9,2026 End Date Nov 9,2026

Location Fort Edmonton 7000 143 St NW, (Whitemud & Fox Dr) Edmonton, AB 780-442-5311

Method of Transportation Cunningham

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 _____