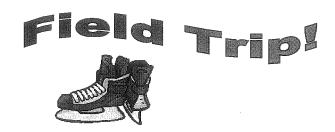
January 16th, 2019



Dear Parents,

On Monday, February 4th, our kindergarten class will be going on a skating trip to Panorama Recreation Centre. Parents and siblings are welcome to join us at no additional charge.

If anyone needs to rent skates, please return the **rental fee of \$3.50** per person to school by Friday, February 1st, so we can purchase rental tickets all at once. Please ensure your child wears appropriate clothing and brings a helmet. **Helmets are required** for even our most experienced skaters. Gloves or mittens are highly recommended. We respectfully request that children **do not** bring vending machine money. They will have lunch just before leaving the school so no one should be hungry.

Our classes will be leaving the school at approximately 12:20pm and will be returning around 2:30pm. We are planning to use parent drivers for this trip. Thank you so much for your support with this. In order to drive children who are not your own, please ensure that you have a completed criminal record check registered with the school board office, as well as \$ 2 000 000 liability insurance on your vehicle. If you are not certain of the status of these items, please speak with Ms. Stewart in our school office.

Please sign and return the permission form attached to this letter by Friday, February 1st.

Thanks so much for your support.	We are looking forward to a	great time!
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Tracey Westwood	
	Yes! I Can Drive For This Trip
Name:	My child is
I can drive	students in seats with seat belts in good working order.
I	have a completed criminal record check
dropped this at the sc	63. I also have a filled in a School Use of Private Vehicle form and hool office.



Form 3040-B Field Trip Consent

Teacher: Westwood	Date Submitted: Jan 10, 2019
Trip Departure Date and Time: Monday Feb. 4/1 School: Brentwood Elem.	Trip Return Date and Time: Handay Feb. 4/19
Destination: Panorama Rec	
Description of Activity including curricular relev	ance (if applicable):
Skating	
Group or class of students: Div 2 Transportation Arrangements: Perent	Grade(s): Kindergarten
Transportation Arrangements:	duvers
Number of participating students:	Cost per student:
PARENT/GUARDIAN AUTHO	RISATION - PLEASE COMPLETE
Please complete and return this form to y payment (if applicable) in cash or cheque	
STUDENT NAME:Ple:	ase print clearly
Plea	icient information about the above planned ild to attend.
Plea Plea YES, I have been provided with suff	icient information about the above planned ild to attend.
Plea YES, I have been provided with suff field trip and give consent for my ch	icient information about the above planned ild to attend.
Plea ☐ YES, I have been provided with suff field trip and give consent for my ch ☐ My child DOES require a booster se	icient information about the above planned ild to attend.
Plea ☐ YES, I have been provided with suff field trip and give consent for my ch ☐ My child DOES require a booster se Parent/Guardian Signature:	icient information about the above planned ild to attend.
Plea ☐ YES, I have been provided with suff field trip and give consent for my ch ☐ My child DOES require a booster se Parent/Guardian Signature:	icient information about the above planned ild to attend. at. Date: this box if you do NOT give your consent: □
Please tick	icient information about the above planned ild to attend. at. Date: this box if you do NOT give your consent:
Please list any medical concerns:	icient information about the above planned ild to attend. at. Date: this box if you do NOT give your consent: