RICHMOND SCHOOL DISTRICT NO. 38

Kathleen McNeely Elementary School

12440 Woodhead Road, Richmond BC V6V 1G3 604-668-6250 | mcneely.sd38.bc.ca Mr. Darryl Under, **Principal**

Ms. Ellen Reid, Vice-Principal

Dear Parents of Grade 6 and 7 Students:

Outdoor Education - April 8, 9, 10

We are very excited to be taking our Grade 6 and 7 students to Camp Elphinstone for an outdoor education experience on April 8-10.

The cost of this extended field trip is \$375.00 per student. This covers the cost of transportation to and from camp, accommodation, all meals, and all activities.

Our first deposit of \$150 has been extended and is due no later than Friday, March 8th.

Payment can be made by using the Cash Online System, cash or cheque. There will be a follow-up payment of \$225 as well. Please see below for the payment schedule:

Cost	\$375.00	
Deposit	\$	Due: Friday, March 8 th
Total	\$	Due: Wednesday, April 3 rd

Each of the payments are now set up in the Cash Online System.

If you have any questions or concerns, please contact the office at 604-668-6250.

Thank you for your continued support.

Sincerely, McNeely Outdoor Ed Staff



PARTICIPATION IN AN OVERNIGHT MULTIPLE-DAY HIGHER-CARE FIELD TRIP AND OUT-OF-PROVINCE/INTERNATIONAL FIELD TRIP LETTER AND CONSENT/WAIVER

Date: April 2024

Dear Parents/Guardians,

This field trip may contain higher-care activities. Please translate.

Information importante: traduisez s'il vous plaît. 重要通告,請找人譯讀。 Mahalagang Pag-uulat: Pakisalin lamang. ਜ਼ਰੂਰੀ ਸੂਚਨਾ ਕਿਰਪਾ ਕਰਕੇ ਅਨੁਵਾਦ ਕਰ. Важное объявление: Пожалуйста переведите.

The purpose of this letter is to inform you about the upcoming field trip that your child will be participating in. Your signature(s) on the attached Consent/Waiver Form confirms that you 1) are aware of the information provided in this letter, 2) acknowledge the inherent risks of the field trip, 3) waive claims against the School District and 4) give consent for your child to participate in this field trip.

Here are the details:

Destination: Camp Elphinstone 1760 YMCA Rd, Gibsons, BC

Date and time of Departure: April 8, 9:30 a.m.

Date and time of Return: April 10, 2:45 p.m.

Transportation type(s): Private Bus; BC Ferries

Cost: \$ 375.00 (amount) to be paid online or by cheque.

For online payment and consent please go to www.SchoolCashOnline.com

Please review the trip itinerary, modes of transportation, inherent risks/mitigation strategies as well as the attached Field Trip Consent/Waiver Form.

We ask that you keep this letter at home and have your child return the completed and signed Field Trip Consent/Waiver Form to me no later than **FRIDAY**, **MARCH 8**.

On this field trip, up to 90 students will be participating in the following educational activities: Students will connect with the natural environment and explore nature-based activities; connect and engage with others (peers and school staff) building relationships and personal, social and leadership skills; participate in alternative Physical Education experiences; explore Place Based learning and local indigenous connections.

Students will prepare for the trip through classroom learning that generates interest and excitement for the time at the Camp Elphinstone; be responsible for packing the appropriate personal gear; be transported to the camp using private buses and BC Ferries; stay overnight for two nights in cabin groups with peers and have meals together; participate in a variety of recreational experiences.

A LIST IS ATTACHED detailing the items and appropriate clothing and equipment that students will be required to bring with them on the trip. Please let your child's teacher know if you need assistance with acquiring any of these items.

The class will be supervised by **10 school employee(s) and Camp Elphinstone Staff**. Please note that your child may not be directly supervised by an adult at all times during this field trip.

On this school-sponsored field trip, your child is expected to behave safely and abide by the District Code of Conduct and we ask that you review these expectations with your child.

Please note that there are risks and precautions inherent in participation in all of the activities associated with this trip, and there is a possibility of personal injury, death, property damage or loss resulting from the activities. Accidents can be the result of the nature of the activity and can occur with or without any fault on either the part of the student, or the school board or its employees or agents or the facility where the activity is taking place. Some inherent risks and precautions, as outlined in the new 2018 YSO/YouthSafe Outdoors Field Trip Resource (Safety First!) include the following:

- Injuries related to motor vehicle incidents en route to and from activity area
- Becoming lost or separated from the group or the group becoming split up
- Injuries related to slips, trips, and falls in the program area or en route to/from it
- Injury or delay related to equipment (e.g., poor fit, improper adjustment, malfunction, improper use)
- Injuries related to colliding with a moving object (e.g., another participant) or with a fixed object (e.g., a tree)
- Foot, knee or other leg injuries (e.g., blisters, sprains, strains)
- Acute or overuse injuries/conditions
- Injuries related to the physical demands of the activity and/or lack of activity skill
- Injuries related to capsize of craft or falling out of craft
- Injuries related to collisions with movable (e.g., other boats or paddles) or immovable (e.g., rock) objects
- Injuries related to equipment (poor fit, improper adjustment, malfunction, or becoming tangled in apparatus; e.g., foot snag in bailer cord)
- Injuries related to lifting, carrying, walking with, or putting down the craft and/or packs
- Other injuries (e.g., blisters, sprains, strains; acute or overuse injuries/conditions)
- Weather changes creating adverse conditions
- Hypothermia due to insufficient clothing
- Loss of manual dexterity in hands during cold and wet weather
- Hyperthermia (e.g., heat exhaustion, heat stroke) due to insufficient hydration, overdressing, and/or overexertion in a hot environment
- Allergic reactions to natural substances (e.g., bee or wasp stings)
- Injuries related to interactions with animals and plants in the environment
- Psychological injury due to anxiety or embarrassment (e.g., re: body size or shape, lack of fitness or skill)
- Suffering an injury while alone on a route/trail
- Complications of an injury or illness due to remoteness and time to emergency services; and
- Other risks normally associated with the activity and environment.

If you have any questions about this overnight, multiple-day higher-care field trip, please contact us by calling the school office at **604-668-6250**.

Please keep a copy of this letter for your records and return the consent form.

Thank you for your support!

Sincerely,

Mr. Unger, Ms. Reid, Mr. Kanda, Mrs. Nistor, Ms. Ewart, Ms. Hsueh, Ms. Clark



PARTICIPATION IN AN OVERNIGHT HIGHER-CARE MULTIPLE-DAY FIELD TRIP AND OUT-OF-PROVINCE/INTERNATIONAL FIELD TRIP CONSENT/WAIVER FORM

This Consent and Waiver must be signed by ALL Custodial Parents or Guardians of a Child who is under the age of 19 years.

Child's Name:	Grade:	Division #:
Destination: Camp Elphinstone	Date of Field Trip: Apri	I 8, 9, 10

In consideration of School District No. 38 offering my child an opportunity to participate in this field trip, I waive any and all claims I may have against, and release from all liability and agree not to sue The Board of Education of School District No.38 and its officers, employees, agents, volunteers and representatives, and the Ministry of Education for any personal injury, death, property damage or loss sustained as a result of my child's participation in the field trip, arising out of any cause whatsoever, including negligence. I understand that my signature below waives my right to sue on my own behalf for damages I may incur, but not the right for myself or a guardian acting on my child's behalf to sue for damages owed the child. The child's rights to sue in the event of negligence are not affected by my signature below.

I hereby give my consent, and acknowledge by my signature below, that my child has my permission to participate in this field trip:

- I am aware of the usual risks and precautions inherent in participation in all the activities associated with this field trip, and the possibility of personal injury, death, property damage or loss resulting from the activities. '
- Accidents can be the result of the nature of the activity and can occur with or without any fault on either
 the part of the student, or the School Board or its employees or agents, or the facility where the activity is
 taking place. By allowing my child to participate in this activity, I am accepting the risk of an accident
 occurring, and agree that this activity, as described in the letter, is suitable for my child.
- My child and I understand that District Code of Conduct applies during all phases of this field trip. This
 includes expectations, directions and instructions from the staff and/or service providers, administrators,
 instructors, and supervisors. In the event my child fails to abide by these expectations, disciplinary action
 may include my child being excluded from further participation or that I be contacted to pick up my child
 (unless I have specified other transportation arrangements) and I will be responsible for any costs
 associated to send my child home.
- I will supply suitable equipment and clothing for my child's participation in all activities associated with the field trip.
- I am aware that I should contact the school for further information if I am unaware what clothing and
 equipment is required for the activities or possible weather conditions of this field trip. My child and I
 understand that it is our responsibility to ensure my child has all necessary equipment and clothing and
 that my child agrees to wear appropriate safety equipment at all times while doing activities where this is
 required.
- I accept the mode of transportation for this activity which may include transportation by a driver with "N" status.
- I acknowledge that it is my responsibility to inform the Lead Teacher of any medical/health concerns that may affect my child's participation. My child has no illnesses, medical conditions, allergies or disabilities that may require special attention.
- I am aware that the School District provides optional student accident insurance and parents will be able to purchase coverage, access claims forms and obtain full plan information online.

- I consent that the Board, through its employees, agents and officers, may secure such emergency medical services and advice as they deem necessary for my child's immediate health and safety, and that I shall be financially responsible for such services and advice.
- I acknowledge that the board may choose to cancel the trip if travel conditions are deemed unsafe (e.g., Canada travel advisory, weather, health advisory). I accept that the board will not be liable for any costs associated with such a cancellation.
- In signing this Consent and Waiver, I am not relying on any oral or written representation or statements made by the School Board and its servants, agents, employees, or authorized volunteers, or the Ministry of Education, to induce me to permit my child to take the trip, other than those set out in this Consent and Waiver.
- I am 19 years of age or more and have read and understand the terms of this consent and waiver, and understand that it is binding upon me, my heirs, executors and administrators.

Parent's/Guardian's Name (please print)	Signature	Date (year/month/day)
	Cell #	Email
Emergency Contact (please print)	Cell #	Relationship to child
• •	t may affect my child's participati chronic conditions, phobias, etc.)	on on the field trip (allergies, recent illness or injury,

Student Commitment to Safety, District Code of Conduct and Acknowledgement of Risk (for students in grades 4 - 12)

My signature below indicates that I will behave safely and abide by the District Code of Conduct while I am on this field trip.

- I will participate in this activity to the best of my abilities.
- I will behave safely and will wear appropriate clothing and use appropriate equipment on this field trip.
- I have been briefed by my teacher on the elements of risk and dangers involved and the precautions that are to be taken.
- I will abide by the District Code of Conduct, school rules, and expectations set out by the Sponsor Teacher and Supervisors during the field trip.
- I will report any safety, medical or health issue or injury to the Sponsor Teacher.

Student's Name (please print)	Signature	Date (year/month/day)

HOW WE LEARN AND WORK TOGETHER

The Board of Education recognizes its obligation to provide all members of our school district community with a positive climate and a safe, healthy environment.

As we learn and work together, we will...

- Show respect for the diversity of the members of our school and district community.
- Behave in a safe, considerate and courteous manner.
- Not threaten, harass, intimidate or assault, in any way, any person within our school district community, through physical violence, print or electronic media.
- Not be in possession of weapons, dangerous articles, alcohol or illegal drugs while in school or work.
- Show respect and pride in our school district buildings and equipment through care and appropriate use of school district property.
- Respect the non smoking environment of our schools and school district facilities.

Our expectations for how we learn and work together shall apply to everyone in our schools and at school functions.

The complete code of conduct

sd38.bc.ca/codeofconduct

RICHMOND



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Ms. Ellen Reid, Vice-Principal

MEDICAL INFORMATION FORM

The information supplied on this form is to be regarded as strictly confidential and shall be made available only to appropriate persons as deemed necessary by school administration.

Name:	Age: Gender:	: Care Card No
Mother's Name:		Cell/Work Phone:
Father's Name:		Cell/Work Phone:
Home Address:		, Richmond, BC,
ALTERNATE	PERSON to contact if parents,	/legal guardians cannot be reached:
Name:	Phone:	Alt. Phone:
PHYSICIAN having medical red	cords of student (family doctor	r):
Name:		Tel:
Office Address:		
No:	now):	
Does the student have allergie		
Food: Hay Fever/Pollen:	Drugs: Asthma:	Insect sting: Others:
Will the student be required to	take any type of prescribed m	nedication? Yes: No:
(If the answer to the above qu	estion is 'yes', the school will co	ontact you.)
All mandinations moved by along	والمحاونة والمحاور المحاور	astic has and include the fallowing information.

All medications must be clearly labelled, placed in a ziploc plastic bag and include the following information:

- a) The required dosage
- b) The time(s) at which it is to be taken
- c) The name of the student to whom it is to be administered

PLEASE NOTE: The responsibility lies with the parent to advise the school if any change occurs in the child's medical or physical condition.



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PARENTAL CONSENT

I hereby give permission for the official in charge to provide medical attention for my child in the event of an emergency, without the necessity of my prior approval. It is understood that if any medical situation occurs, a responsible adult will ensure that the student receives proper medical attention and that arrangements are made for his/her return home, if necessary. I understand that I will be notified by the quickest means possible if this authority is exercised. In case of emergency, I give permission to the physician selected by the school to provide treatment for my child. It is understood that the teacher, school and school board are <u>not</u> responsible for medical care costs.

Signature of Parent or Guardian	Data	
Signature of Parent or Guardian	_ Date:	



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OUTDOOR EDUCATION NON-PRESCRIPTION MEDICATION FORM

Dear Parents/Guardians,

This form is intended to provide information and permission for school staff to <u>administer non-prescription medication</u> (Tylenol, Benadryl, etc.) to students while on our Outdoor Education field trip to Camp Elphinstone from April 8-10, 2024. It is the parent's responsibility to provide school staff with any necessary non-prescription medication your child may require while on this field trip. School staff will hold and administer any medication during the course of this trip.

Please return this form only <u>if your child will require non-prescription medication</u> while at camp

Student Name:		Date:
My child may require non-prescrip their Outdoor Education Field Trip	• •	Benadryl, etc.) during the course of es to your child):
Yes		
Name and Dosage of Medication:_		
My child is able to administer this	medication him/herself u	nder adult supervision:
Yes		No
I give permission for Outdoor Educ prescription medication while at Co		•
Parent Name:		
Parent Signature		

Camp Elphinstone PACKING GUIDE

LUGGAGE

Bath towel

□ Sunscreen

wet clothes

Reusable water bottle

PERSONAL ITEMS

☐ Laundry or garbage bags for dirty or

- We have limited space, so everything should be in **ONE** labelled piece of luggage that a student can carry for a short distance.
- Duffel bags, hockey bags, backpacks, or small suitcases are fine.
- Sleeping bags and pillows should be in their own labelled bag or a separate, tied plastic garbage bag that is clearly labelled.

	Sleeping bag		Shorts
	Pillow (optional)		T-shirts (3)
	Toiletries [in bag/Ziploc]		Pants
	ToothbrushToothpaste		Warm top layers (2) – eg. sweater,
			sweatshirt, fleece jacket
☐ Face cloth/Wash cloth			Waterproof jacket or rain gear (an inexpensive poncho works great)
	Soap (in a plastic container)		Shoes: sneakers or light hikers are best –
	Deodorant]	it will be helpful to have two pairs incase
	☐ Comb/brush		one gets wet)
	☐ Feminine products, etc.		Pajamas

CLOTHING

Underwear for three days

pairs

□ Hat

☐ Socks for three days, plus three extra

What to wear: Be sure to check the weather before packing for camp and pack clothes that you can be active in. Jeans are great for cooler weather but can make it difficult to participate in physical activities. Avoid cotton if possible; synthetic materials and wool are best for outdoor activities.

Camp Elphinstone PACKING GUIDE

OPTIONAL

- ☐ Flashlight (with fresh batteries)
- ☐ Insect repellent
- Sunglasses
- Toque (for cold evenings)
- ☐ Bedsheets (student bunks can be set up with a bottom and top sheet and blanket)
- ☐ Camera (not expensive, labelled and kept with adults)
- ☐ Hair dryer (plan with friends, only one per room is needed)
- ☐ Deck of cards, journal, pencils, etc for guiet times
- A small amount of money for purchases at the ferry (All food purchases must be consumed before leaving the ferry)

PLEASE DO NOT BRING THE FOLLOWING ITEMS

Camp Elphinstone will not be held responsible for lost or damaged items. Items listed will be removed for animal/human safety and security reasons.



• Knives or other weapons/pocket tools



• Money or other valuables



• Any electronics: cell phones, gaming devices, etc.



Food or drinks (except for water)



Please be sure to properly label your belongings with both your name and group name. Items left behind will be kept and held for 2 weeks, after which will be given to those in need.

Camp Elphinstone

WHAT IS A HEAT ROOM?

To keep your home and our facility bed bug free, we have a specially constructed heat treatment room. Bags are heated to 125 degrees (about the temperature of a clothes dryer) which ensures that any bed bugs and/or eggs that may be contained within participants' belongings are killed prior to moving into cabins. The whole process takes 2 hours.

WHAT GOES IN THE HEAT ROOM?

All bedding, clothing, and cloth bags must go in the heat room!

WHAT DOESN'T GO IN THE HEAT ROOM?

- Plastics, such as toiletries and cosmetics
- Cameras and any other electronics (should be left at home)
- Medicines and medical devices
- Aerosols or creams (e.g. sunscreen)
- Food, including pop cans (these items are not allowed at camp anyway)
- Candles and wax
- Photographs

HOW SHOULD BAGS BE PACKED for the heat room

- Write your name and group's name on a ziplock bag and put all items not going into the heat room in this bag
- Keep this zip-lock at the top of your overnight bag so it can easily be removed before the overnight bag goes in the heat room
- Zip-locks will be placed in bins and given back to you when you collect your treated luggage

