



December 2<sup>nd</sup>, 2010

Dear Grade Four Parents,

### **Field Trip to the Canada Science and Technology Museum**

I am pleased to announce the Grade Four class will be visiting the Canada Science and Technology Museum on Wednesday, January 12<sup>th</sup>. We will be exploring Light and Sound as a part of our **You Light Up My Life** Unit of Inquiry and Pulleys and Gears as an early preview to our **Lasting Legacies** Unit of Inquiry.

We will enjoy two Science workshops:

#### **Looking at Light** (9:00-10:15)

Discover how light is produced and transmitted as you move through activity stations. Experiment with different materials to study reflection, refraction, and absorption. View the world through instruments such as microscopes, telescopes, periscopes, and kaleidoscopes, and use special filters to explore the world of colour.

#### **Pulleys & Gears** (10:30-11:45)

Discover why pulleys, gears, the wheel, and the axle are such clever inventions, and how they reduce the force required to do work. Build gear trains using hands-on activity boards. Using model cranes, create a block and tackle to lift a heavy weight with minimal effort. Examine various applications of these devices as you discover pulleys and gears in everyday objects.

We will be leaving the school at 8:40 a.m. and returning in time for lunch. **The cost of the trip is \$24 per student.** Please complete the attached consent form and return it to Ms Powadiuk by Friday, January 7<sup>th</sup>. If you are available to volunteer for this trip, please email me at your earliest convenience.

Sincerely,

Nicola Powadiuk  
Grade Four Teacher  
[npowadiuk@elmwood.ca](mailto:npowadiuk@elmwood.ca)



**Elmwood School Parent/Guardian Consent and Release Form (Day)**  
for Excursion to the **Canadian Science & Technology Museum (Grade Four)**

Date of Trip: January 12<sup>th</sup>, 2011  
Departure: 8:40 a.m. Return: noon  
Destination: Canadian Science & Technology Museum (St. Laurent Blvd.)

\*\* In the case of joint custody, BOTH parents must sign this Consent/Release form \*\*

**COST OF TRIP**

By my signature below, I allow Elmwood School to bill my account \$24 for the cost of this trip. **I understand that Elmwood School will incur fixed costs as a result of this commitment and accordingly there are no refunds in the event that my daughter is unable to participate.**

**MEDICAL INFORMATION and EMERGENCY CONTACT INFORMATION**

Student: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Month Day Year

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Condition(s): \_\_\_\_\_  
\_\_\_\_\_

Medication(s): \_\_\_\_\_  
\_\_\_\_\_

Allergies: \_\_\_\_\_  
\_\_\_\_\_

Ontario Health Card Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

## **CONSENT TO PARTICIPATE & TERMS OF PARTICIPATION**

By my signature below, I give my daughter in Grade Four permission to attend the trip to the Canadian Science and Technology Museum on Wednesday, January, 12<sup>th</sup>, 2011.

I understand that all of Elmwood School's rules and policies (see Handbook) as well as any rules and directives established by those leading the trip remain in full force and effect for the duration of the trip.

By my signature below, I acknowledge and agree that I am solely responsible for any costs arising out of my daughter's breach of any of Elmwood School's rules and policies and/or any rules and directives established by those leading the trip and the resultant disciplinary actions, if any, whether occurring prior to or during the trip.

By my signature below, I further acknowledge and agree that in the event that my daughter breaches any of Elmwood School's rules and policies and/or any rules and directives established by those leading the trip while on the trip, Elmwood School may in its absolute discretion require that my daughter immediately return home and any expenses related to such a return (including without limitation travel, including travel of an adult to accompany my daughter, and any outstanding trip expenses) will be my sole responsibility.

## **RELEASE AND INDEMNITY**

In consideration of my daughter being permitted to participate in the science-based workshops at the Canadian Science and Technology Museum. I do for myself, my daughter, my spouse and our respective heirs, executors, administrators, successors and assigns, agree as follows:

I acknowledge and accept that participation in the trip may expose my daughter to unspecified risks and hazards, which are inherent in such trips, including without limitation, the method of transportation for the trip, all of which I expressly and voluntarily assume.

By my signature below, I do for myself, my daughter, my spouse and our respective heirs, executors, administrators, successors and assigns, hereby RELEASE, WAIVE AND FOREVER DISCHARGE Elmwood School Inc. and its respective officers, partners, agents, employees, servants, representatives, successors and assigns ("the Releasees") OF AND FROM any and all actions, causes of actions, complaints, demands and claims whatsoever in existence prior to on or after the date hereof whether in law or in equity, in respect of death, injury, loss or damage to my daughter's person or my person or property HOWSOEVER CAUSED, arising or to arise by reason of my daughter's participation in the activities contemplated herein except to the extent that same are directly caused by the gross negligence of Elmwood School Inc. or its respective officers, partners, agents, employees, servants, representatives, successors and assigns. I FURTHER UNDERTAKE TO HOLD AND SAVE HARMLESS AND AGREE TO INDEMNIFY all the aforesaid from and against any and all liability incurred by any or all of them arising as a result of or in any way connected to my daughter's participation in the activities contemplated herein.

By my signature below, I also agree and undertake not to make any claim or take any proceedings against the Releasees set out above, or any other person or corporation which might claim contribution or indemnity under the provisions of any statute or otherwise from the Releasees set out above.

**EMERGENCY MEDICAL CONSENT**

In the event of an emergency, Elmwood School requires parental consent in order to consent to the medical treatment or surgery of the student. Elmwood School will use reasonable efforts to contact the parent(s) prior to consenting to medical treatment for the student and the parent(s) acknowledge and agree that the need for an immediate decision regarding medical treatment for the student may make such contact impossible.

Accordingly, I, by my signature below, hereby authorize and give my express consent to the Head of Elmwood School, or her delegate, to act in loco parentis and in that capacity to consent to medical treatment or surgery for the student based on the advice of the attending physician who considers immediate medical treatment or surgery to be a necessity.

In addition, by my signature below, I hereby authorize and give my express consent to the Head of Elmwood School, or her delegate, to seek and obtain any and all medical interventions that may be reasonably required to ensure the safety and well being of my daughter while on the trip.

**I have read all of the foregoing carefully and by my signature agree to be bound by all aspects of the foregoing.**

Parent Name: \_\_\_\_\_

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

Parent Signature: \_\_\_\_\_

Parent Name: \_\_\_\_\_

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

Parent Signature: \_\_\_\_\_

**Please return this form to Ms Powadiuk by Friday, January 7, 2011.**