

**Experiential Learning
INFORMED CONSENT AND WAIVER FORM
For Students Participating In Activities
Involving Community Mentors**

Student Name: _____ **Date of Birth:** _____

Date:

An experiential learning activity or program provides students with opportunities to experience what they have learned in the classroom in a "real world" way. Often, this involves "hands on" activities experienced under the guidance of a community person acting in a "mentor" capacity. Mentoring is a partnership in which a person with a particular skill or expertise works with teachers and students to help students see how what they learn in the classroom applies in the world beyond the school walls.

Following is an overview of the program/activity planned for your child:

Students will be:

- Engaged in an educational program developed and overseen by a person who is a school district employee
- Engaged in a mentorship activity involving a person who may not be a school district employee.
- Travelling to and from the activity by school bus and/or staff vehicles, by driving their own vehicles, by riding a bike or walking. Ferry travel may, in some case, be necessary.

Initial

The number of students involved will vary, depending on the activity.

Initial

Participation may require traveling off-island and may involve an overnight stay.

Initial

Your child will not necessarily be directly supervised by an adult at all times.

Initial

My child has no illnesses, allergies or disabilities that may require special attention, except as described here:

Initial

I am aware that there are risks and dangers inherent in participation in the kinds of programs in which my child will be engaged. I am aware of the possibility of personal injury, death, property damage or loss resulting from these activities. I understand that the dangers and risks may include, but not be limited to:

- Risks and dangers inherent in the form of transportation, the location and terrain, and the weather, and any combination thereof
- Risks and dangers inherent in the use of tools and equipment, particularly if used inappropriately, and if the tools or equipment break, or otherwise fail.
- Conduct of the guide, chaperone or other community members.
- The students failure to heed safety instructions or restrictions given to the group.

Initial

I will supply suitable equipment and clothing for my child's participation in all activities associated with the placement, including:

Initial

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 during this activity. My child and I understand that it is our responsibility to ensure my child has all necessary equipment and clothing.

Initial

My child and I understand that the school's Code of Conduct applies during this activity. I will be responsible for any costs resulting from my child's failure to abide by the Code of Conduct, including any costs involved in sending my child home, prior to the conclusion of the activity.

Initial

My child will have a cell phone with him/her, and the number is (250) _____ - _____

Accidents can be the result of the nature of the activity and can occur with or without any fault on either part of the student, or the School Board or its employees or agents, or the facility where the activity is taking place. By allowing your son/daughter to participate in this activity, you are accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for your child.

Initial

Parent/Guardian Consent and Waiver

In consideration of School District No. 64 (Gulf Islands) offering my child _____, an opportunity to participate in an Experiential Learning activity or program, I hereby give my consent. I acknowledge by my signature that this activity will take place during the current school year and that I have consented to my child participating in any and/or all of these activities.

In signing this consent and Waiver, I am not relying on any oral or written representation or statements made by the Board of Education and its servants, agents, employees, or authorized volunteers, or the Ministry of Education, to induce me to permit my child to engage in the activity, 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.

Date:

Signature of Witness

Signature of Parent/Guardian

Printed Name of Witness

Printed Name of Parent/Guardian

Address

Address

Date:

Signature of Witness

Signature of Parent/Guardian

Printed Name of Witness

Printed Name of Parent/Guardian

Address

Address

NOTE: This Consent Form must be signed by a custodial parent or legal guardian of a child who is under the age of 19 years.