



# Polson School

491 Munroe Ave. | Winnipeg, MB R2K 1H5 | Tel: 204.669.4490 | Fax: 204.668.9343  
Principal: Mr. D. Busceti | Email: pol@retsd.mb.ca | Web: www.pol.retsd.mb.ca

December 10, 2019

Re: Grade 1 and 2 Visit Miles Macdonell Drama Performances

Families of Grade 1 and 2 students,

On Wednesday December 18<sup>th</sup> your child will have an opportunity to visit Miles Macdonell and watch performances put on by the grade 11 drama students. They will be performing children's plays that are completely written and designed by Miles Macdonell drama students. There will be four short plays, each with a unique moral or lesson.

Following the performance, students will be invited to come up on the stage with the class and learn a little bit about what it takes to be a drama student. Students will have the chance to play drama games and get to know the grade 11 drama students.

Polson students will be taken by school bus to Miles Macdonell Collegiate (757 Roch Street). The bus will leave around 9:30am and return shortly after lunch has begun. If your child normally goes home for lunch, please send them a lunch and they are welcome to eat at school. There will be no charge as it is a school event.

Attached you will find a permission form for this activity. There is no cost to this event. Please complete the form and return it to the classroom teacher by **Monday, December 16<sup>th</sup>**.

This is an exciting opportunity for your child to get to share and celebrate the learning other students in the community are doing. It will expose your child to an authentic experience in which they will see reading, writing, oral language skills, and performing integrated in a purposeful way.

Mrs. Gale & Mrs. Awang



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**Board Responsibilities:**

The board will make every reasonable effort through the application of its policies and procedures, to provide for thorough preparation and planning and implementation of out of school activities undertaken by its employees, agents and officers.

**Activity Title : Miles Macdonell Drama Performances**

**Date: Wednesday, December 18, 2019**

**Name of Student (please print): \_\_\_\_\_**

I/We, the undersigned, hereby acknowledge that certain risks of injury are inherent in the participation in sports, recreational activities and other off-school site programs. These types of injuries may be minor or serious.

I/We understand that, in case of emergency medical or hospital services being required by the above-listed participant, and with the understanding that every reasonable effort will be made by the school/hospital to contact me, my signature on this form authorizes the board, through its employees, agents, and officers, [to] secure such medical advice and services as they deem necessary for my child's health and safety, and that I shall be financially responsible for such advice and services.

I/We understand that the Rules and Regulations pertaining to this activity are designed for the safety and protection of participants.

I/We acknowledge my right to obtain as much information as I require about this program or activity and associated risks and hazards, including information beyond that provided to me by the school.

I/We acknowledge that it is my responsibility to advise the school of any medical and/or health concerns of my child that may affect his/her participation in the stated program or activity.

I/We understand that the choice to participate brings with the individual the ASSUMPTION OF RISK which is part of those activities.

I/We understand and agree that this is a part of the school program. I/We also understand that as a result of participating in this program that the participant is expected to follow the school procedures and code of conduct and that any deviations from these may result in consequences from the school administration.

I/We declare having read and understood the above INFORMED CONSENT AGREEMENT in its entirety and hereby consent to participate being aware of all the foregoing.

\_\_\_\_\_  
*Parent/Guardian Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Contact Number*

**In order for your child to participate in this event, page 2 of this signed consent form must be received at the school before the event.**