

Robert Andrews School

3230 Manlius St. | East St. Paul, MB R2E 0H7 | Tel: 204.661.5838 | Fax: 204.669.7002
Principal: Mr. T. Stoesz | Vice-principal: Ms. A. Maharaj
Email: ra@retsd.mb.ca | Web: www.retsd.mb.ca/school/ra

November 16, 2017

Dear Parents/Guardians:

We are planning a Winter Camp Trip to Camp Arnes for our Grade 6 and 7 students from January 22nd to 24th, 2018. The cost of this trip is \$245.00 per student, which will cover the accommodations, meals, evening snacks, pool time, all activities and transportation.

The following is a list of some possible camp activities:

- quincee building - astronomy - cooperative games
- cross-country skiing - ice fishing - emergency shelter building
- hayride - fire building and bannock - ice and snow studies
- snowshoeing - broomball - swimming
- initiative tasks - nature centre and hike

If you are interested in having your son/daughter take part in the Winter Camp trip, please complete the consent form, attached with an initial payment of **\$85.00** that is **non-refundable**. Camp applications and deposits should be turned into Mr. Beilman (Grade 6) or Mrs. Hrabi (Grade 7). The deadline to hand in camp applications is **Friday, December 1st, 2017**.

All students being considered for this trip must exhibit satisfactory academic progress, good attendance and appropriate behaviour, with standards to be determined by the teachers and administration at the school.

Cheques should be made payable to **Robert Andrews School**. The balance payment of \$160.00 will be due **Friday, January 12th, 2018**.

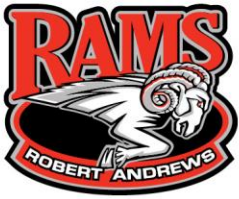
A parent meeting for information sharing and questions will be held on Thursday, December 7th, 2017 at 6:00 p.m. in the Learning Commons. If you have any questions requiring immediate attention, please do not hesitate to e-mail Mr. Beilman @ bbeilman@retsd.mb.ca or Mrs. Hrabi @ chrabi@retsd.mb.ca.

Sincerely,

On behalf of the Grade 6 and Grade 7 team,

Two handwritten signatures in blue ink. The signature on the left is "Chrabi" and the signature on the right is "Beilman".

Mrs. Hrabi and Mr. Beilman



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Parental Informed Consent for Out of School Activities

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.

Name of Program/Activity: Grade 6 and 7 Winter Camp
Location: Camp Arnes
Date & Time of Activity: January 22nd – 24th, 2018
Due Date: Friday, December 1st, 2017



Name of Program/Activity: Grade 6 and 7 Winter Camp

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.

Name of Student (please print): _____

Would like to attend the Grade 6 and 7 Winter Camp.

Enclosed is the \$85.00 non-refundable deposit. Cash Cheque _____
Name if different than student

Parent/Guardian Signature

Date