



**PARENT CONSENT/PERMISSION FORM FOR EDUCATIONAL TRIPS
(Students under 18, detailed form for activities with obvious inherent risk)**

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.

St. Benedict C.S.S.

_____, of the Waterloo Catholic District School Board is arranging
(Name of School / Program)

M.O.P.A. (Most Outrageous Paint Activity)

(Description of activity, location, dates and mode of transportation)

ELEMENTS OF RISK

Educational activity programs, such as **MOPA**, which is being offered, involved certain elements of risk. Accidents may occur while participating in these activities. These accidents may cause injury.

These accidents result from the nature of the activity and can occur 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 choosing to participate in the activity, you are assuming the risk of an accident occurring.

The chance of an accident occurring can be reduced by carefully following instructions at all times while engaged in the activity.

The Waterloo Catholic District School Board does not provide any accidental death, disability, dismemberment, dental, or medical expenses insurance on behalf of the students participating in this activity.

The Waterloo Catholic District School Board strongly advises that all students participate in the **STUDENT ACCIDENT INSURANCE PLAN** offered by the Reliable Life Insurance Company and which covers participants for all accidents, 24-hours per day, every day during the full policy term.

ACKNOWLEDGEMENT

WE HAVE READ THE ABOVE. WE UNDERSTAND THAT IN PARTICIPATING IN THE **MOPA**, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.

Signature of Student: _____

Date: _____

Signature of Parent/Guardian: _____

Date: _____

PERMISSION

I give _____ permission to participate in **MOPA**

To be held on or about **Friday, June 8th, 2018**

Signature of Parent/Guardian: _____ Date: _____