

**Campbell Collegiate**  
**Grade 9 Music Retreat Permission Form**  
**(Please return this form by Thursday, September 21 , 2017)**

Dear Mr. and Mrs. Baird:

I have read and am informed about the retreat at **Living Hope Alliance Church**. I understand there is a cost of **\$20.00** which is included in the school music fee. I will ensure that my child's school fees will be paid in September and October as indicated in the Campbell School Calendar.

I understand that buses will be provided to transport students to and from Living Hope Alliance Church from Campbell Collegiate.

**Please print your son/daughter's full name in the space below:**

**Student name:** \_\_\_\_\_ **Grade** \_\_\_\_\_

In the event of an emergency please provide 2 contacts:

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Parent Helper: (please place a check mark beside the following statement if you are able to help):**

I am able to help with the set up of lunch and snacks \_\_\_\_\_

**Medical Information Update:** Please include in the space below any medical or health concerns not included on the previously submitted School Registration Form. Please include Food allergies and sensitivities your child may have.


I, the undersigned parent or guardian of the above named student, request that my son/daughter be allowed to participate in the curricular event described.

Both my son/daughter and I understand that the Regina Board of Education Pupil Discipline Policy applies on all music trips. The use of alcohol or drugs and/or inappropriate student conduct may result in suspension from school. Students engaging in these behaviors are liable to be sent home at their family's expense. The parent or guardian will be contacted prior to any action being taken. If no direct contact is made with the parent or guardian the student will not be sent home unless accompanied by a staff member.

Parent/Guardian name (**please print**): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

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

Student Signature: \_\_\_\_\_