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SCHOOL ACTIVITY INFORMATION & PERMISSION FORM

THIS FORM IS TO BE RETURNED BY: Wed. NOV 30, 20 22.
ACTIVITY (including purpose & location details): Volleyball Game at Isfield
ACTIVITY DATE: Manday Dec. 5,2077
DEPARTURE TIME from school: 9:45 a.m. RETURN TIME to school: 12:00 p.m.
COST: () FEES DUE:
TRANSPORTATION ARRANGEMENTS: Parent - Driver
SUPERVISED BY: Mr. McKague
UNUSUAL FACTORS/RISKS: AFALOY. 2 20 any
OTHER DETAILS: Game vs 75 Feld Stockents.
come stocking
PARENTAL PERMISSION
, Grinted name of parent/superlies), GIVE DO NOT GIVE permission for
(Printed name of parent/guardian)
(Printed name of child) to participate in this activity.
I have read and understood the information.
Signad
(Signature of parent/guardian)
Phone:
RELEVANT STUDENT MEDICAL CONDITIONS that the school should know:
THE STATE OF SELECTION STATE THE SCHOOL Should know:
Please check
all that apply.
☐ I AM able to DRIVE TO and FROM destination.
 I have completed required paperwork at the school office. I have offered to drive for an additional classroom.
 I have seats available for grade
I have seats available for grade
Return top portion to the school. Sove bettern notice for
Return top portion to the school. Save bottom portion for your records.
THIS FORM IS TO BE RETURNED BY: Wed, NOV 30, 7072
ACTIVITY (including purpose & location details): Volley ball game at ISfield
ACTIVITY DATE: MONDAY Dec. 5, 2022
DEPARTURE TIME from school: 9.45 am RETURN TIME to school: 12:00
COST: FEES DUE:
TRANSPORTATION ARRANGEMENTS: Pare 17 + - Oriver
UNUSUAL FACTORS/RISKS: Athleta Insury