

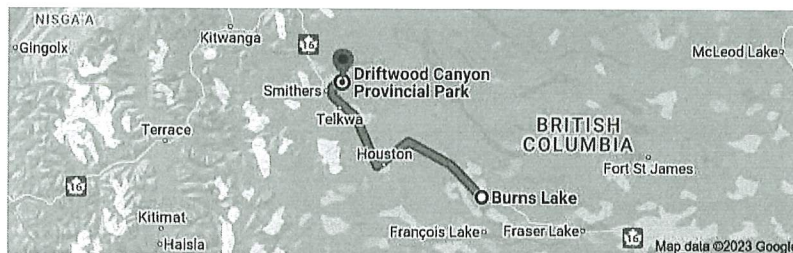


Lakes District Secondary School

PO Box 3000 Burns Lake, BC V0J 1E0

FIELD TRIP PERMISSION REQUEST

On May 24th, students in grade 11 & 12 Environmental Science classes will be provided with an amazing opportunity to participate in outdoor learning. These activities will take place during the school day. Students will be gone for the full day. We will not be back until after dismissal, approximately 6:00pm. We will be leaving Driftwood Canyon Provincial Park at 4:00pm and it takes about 1 hour and 46 minutes from there to Burns Lake.



This is entirely optional for the students. The minibus will be used for this event, meaning 23 students are able to attend. Those who submit their permission forms first will be able to go.

A rough itinerary:

- Leaving LDSS by 9:00am
- Nature walks at Tyhee Lake or Call Lake Provincial Park

On site at Driftwood for a 3-hour period from 1pm to 4pm.

- Viewing BC Parks fossil specimens
- Viewing local shale/rock from fossil beds
- Discussion: Statement of Significance and Management Direction for Driftwood Canyon Provincial Park
 - Students will be asked to put on their BC Parks Management hats and discuss how they would manage the fossil resource at Driftwood given the current management pressures.
- Discussion: Management Direction Statement
 - Explain in greater detail the conservation, recreation, and cultural values for Driftwood Canyon
- Activity: Team Investigation
- Activity: Short walk to viewpoints and interpretive signage
- Discussion: Talk about our roles in BC Parks
 - Day in the life of a Park Ranger, Conservation Biologist, Supervisor, and other roles (Possibly a Conservation Officer as well).

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All school rules apply (no alcohol, no drugs, no vaping etc.). **They should be prepared with the appropriate clothing** (hats, sunglasses, light wear pants and a T-shirt, **proper footwear (no flip flops)**, **sunscreen, bug spray, water bottle, snacks, lunch, and spending money for food (just in case we stop for food).**

Students should have a packed lunch just in case we do not have time to stop for food.

Please let me know if you need help with any of the above items. If you have any questions do not hesitate to ask, sdebruijn@sd91.bc.ca.

I _____ of _____
(parent/guardian) (student's name)

MEDICAL INFORMATION

Name of Student: _____

Address: _____

Date of Birth: _____

Care card number: _____

Emergency person: _____ Phone number: _____

Family Doctor: _____ Phone Number: _____

Medical Alerts:

Serious known allergies:

Precautions to be taken:

Known allergies to medications: _____

Allergy injections or drugs currently prescribed: _____

Daily medication required:	Yes	No	Name of drug
1. Diabetes	_____	_____	_____
2. Epilepsy	_____	_____	_____
3. Other	_____	_____	_____
_____	_____	_____	_____

Is there any other information you feel we should know about your child?

Parent Signature: _____