

AP 308-12 International Field Trip – Declaration Form

I, _____ of _____
Name of Legal Guardian Address

In the City of _____
in the Province of British Columbia, solemnly declare that:

1. I am the legal guardian of _____
Name of Student
2. I am aware the Student wishes to participate in the _____
Name of School
trip to _____ on _____
Location of Trip Date of Trip
3. I accept sole responsibility should the Student suffer harm during the course of the Trip, directly or indirectly, as a result of terrorist activity, insurrection or war which may involve risk of disease, bodily injury and risk to life.
4. I have discussed the risks and possible consequences of participating in the Trip with the Student and am satisfied that the Student fully understands and accepts those risks and consequences.
5. I have been advised and understand that the Trip involves international travel, which, during this time of terrorist activity and threat of insurrection and war, involves risk of disease, bodily injury and risk to life.
6. I recognize that but for my acceptance of sole responsibility, the district would not permit the student to participate in the trip.
7. I accept sole responsibility for all financial costs or losses arising out of cancellation or disruption of this trip.
8. Having considered all circumstances and risks pertaining to the Trip including those described above, I hereby give my permission for _____ to participate in the Trip.
Name of Student

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same legal force and effect as if made under oath.

Legal Guardian Signature

Witness Signature

Legal Guardian Name (please print)

Name of Witness (please print)

Date