



MODULE VANIER

235 Frontenac St., Kingston (ON) K7L 3S7
Tel.: (613) 544-7698 Fax: (613) 544-6335 Email: mvanl@limestone.on.ca

M B. Lambert – Vice-Principal (Vanier)
Mrs. T. McKenna – Principal (KCVI/Vanier)

Mme J. Hamlyn – Office Administrator
Mr. J. Blackstock – Head Caretaker



April 8, 2019

Dear Parents/Guardians,

Our grade 7 year end field trip this year will be to Ottawa for all students in 7A, 7B, 7C, 7D and 7E on Friday, May 31, 2019. Students will be leaving for the trip at 7:00 a.m. (students should gather at 6:45 a.m.) and returning at 8:00 p.m.

The activities we have selected are connected to curriculum expectations in French, History/Geography, Math, Art, English and Physical Education. This trip will include the following activities:

Canadian Mint

<http://www.mint.ca/store/mint/visit-the-mint/ottawa-location-8900022#.Wj0v2NKnG1s>

We will enjoy a guided tour of the Ottawa location of the mint.

Byward Market <http://www.byward-market.com/>

Students will be able to explore Ottawa's historic Byward Market and shop for souvenirs if they wish. During this time, students can choose to purchase food for their lunch or supper (depending on which group they are in), or bring food from home.

Canadian History Museum <http://www.historymuseum.ca/>

Students will tour the museum.

Camp Fortune <http://campfortune.com/en/explorer-park/>

After a 30 minute safety lesson, students will Zipline through the beauty of the Gatineau Hills. Students will eat their own packed picnic lunch or supper, depending on which group they are in, after zipping.

Cost of trip:

This field trip will be \$ 80.00. This fee includes:
cost of all museums and program at Camp Fortune
cost of transportation (school bus)

Additional costs:

Students who wish to purchase souvenirs and food at the Byward Market will need to bring personal funds to do so. Students who do not wish to purchase food will need to bring a bagged lunch and supper from home.

In order to finalize our plans for this exciting trip, we must know as soon as possible how many students from Grade 7 are able to attend. A **non-refundable deposit of \$35.00** (cheques payable to Module Vanier) is required to secure a space for your child.

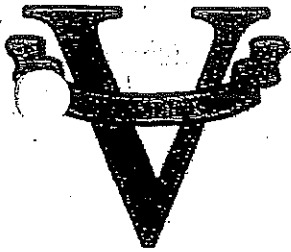
The following items are required by **Monday April 15, 2019**:

- ☐ Registration form
- ☐ Limestone District School Board Inherent Risk form
- ☐ Camp Fortune waiver
- ☐ Non-refundable \$35.00 deposit (cheques payable to Module Vanier)

The balance of payment of \$45 will be due on Thursday May 16, 2019. A kit list and full itinerary will follow in advance of the trip so students can bring needed equipment.

If you have any questions about the trip, please contact the school.

T. Stoddart
J. Swift
V. Hopkins
C. Suenaga
D. Lord



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Registration form for grade 7 Ottawa trip Friday, May 31st, 2019

*Please return this to homeroom teachers by Monday, April 15th, 2019

Last name: _____ First Name: _____

Home Address: _____

Home phone number: () _____

EMERGENCY CONTACT INFORMATION

CONTACT #1

Name: _____ Relationship to student: _____

Phone: () _____ Cell phone: () _____

CONTACT #2

Name: _____ Relationship to student: _____

Phone: () _____ Cell phone: () _____

HEALTH INFORMATION

The school should be aware of special health conditions which might affect the progress or welfare of your son/daughter while on this trip. Please specify this information below, with comments or recommendations:

My child, _____, has permission to participate in the grade 7
Ottawa trip Friday, May 31st, 2019.

I have attached the \$35.00 non-refundable deposit for this trip. I understand that the balance of the trip (i.e. \$45) will be due by Thursday May 16th, 2019.

Parent/ Guardian Signature: _____ Date: _____

Parent Chaperone Volunteer

We require a number of parent volunteers to act as chaperones for this trip. Parents will be in charge of a small group of 8-10 students. Volunteers must have a current Criminal Reference Check that they can provide the school. Volunteers need to be prepared to participate fully in this trip which is in French, very active and a long day. There will be a \$28 charge for those parents who wish to zipline with the group.

The number of chaperones will be determined by the number of students attending. We will contact you if your services will be required.

I would like to volunteer as a chaperone for this trip.

Name: _____

Relationship to Student: _____

Contact information:



INHERENT RISKS WARNING & WAIVER FORM

Activity: Camp Fortune Aerial Park & Ziplines

Location: Camp Fortune & 3133591 Manitoba Ltd, 300 ch Dunlop Chelsea, Québec

Date: _____

First Name: _____ Last Name: _____

Address: _____ Date of Birth: _____

City: _____ Province: _____ Postal Code: _____

E-mail: _____ Telephone: _____

☐ I agree to receive Camp Fortune's newsletter containing promotions, news and updates regarding Camp Fortune's products and services. You can withdraw consent at any time.

In case of emergency -- Name: _____ Telephone: _____

- I hereby acknowledge understanding the inherent risks of the activity offered by **Camp Fortune's Aerial Park and ziplines.**
- **Aerial Park and ziplines:** I acknowledge understanding the inherent risks of the use of harnesses and security equipment, of the difficulty of form, shapes and mobility of each activity, platforms, games and zip lines;
- I undertake to give the necessary attention needed to understand the detailed instructions concerning the activities and its security measures during the **mandatory** information meeting & initiation session prior to these activities;
- I acknowledge understanding the implications of my participation concerning the inherent risks of possible accidents and physical injuries that could arise from these activities;
- I am the best and only one to judge if my skills are sufficient to participate to this activity. I am aware of the risks of physical injuries I am exposing myself to and this on my own free will and knowledge;
- I am in good physical and mental health. I have no handicap that may imply a danger inherent to my participation and I accept to participate on my own free will;
- I therefore acknowledge and understand that **Camp Fortune & 3133591 Manitoba Ltd.** and his subsidiaries or any organizer are not be held responsible for any accident and/or physical injury arising from my participation in these activities unless arising from Camp Fortune & 3133591 Manitoba Ltd 's sole negligence.
- I acknowledge that I have read agreement and understand risks associated with **aerial park & ziplines** INITIALS _____

My age is _____ years old. Date: _____

Signature of participant: _____

Since I am under the age of 16, I am enclosing the written agreement signed by my parents;

Parent (s)/Guardian signature: _____

How did you hear about Camp Fortune? _____

HARNESS: # _____	& GLOVES _____	ADULT _____	TEEN _____	JUNIOR _____	VISIT _____	20 _____
OR _____			GIVEN BY: _____		Departure: _____ h	
OUT _____	NO _____					

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