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Web: cca.rockyview.ab.ca
Principal: Allan Elkin
Assistant Principal: Jackie Root



June 2016

Dear Cochrane Christian Academy Parents,

The CCA elementary team consisting of Gr. 1, 1/2, 2, 3, 3/4, and 4 will be going on an end of the year field trip to Calaway Park. The date of the fieldtrip is **Wednesday, June 22nd, 2016**. Bus transportation will be provided for the students to Calaway Park and back to the school.

The buses will depart the school at 9:00 a.m. and depart from Calaway Park at 1:45 p.m. Children will be placed in grade level groups of four with one parent volunteer and will move around the park throughout the day.

A designated location within the park will be chosen to get together for lunch at 11:45 a.m. Last year, this location was a large tent in the west end of the park. This will be confirmed on the field trip day.

This field trip requires a large number of parent volunteers in order to make it feasible because of the necessity for adequate supervision of our students. The park entrance fee for all parent volunteers is free and the ratio is one parent to four children maximum. Teachers are hopeful enough parents will want to participate in this special event with CCA. Parent volunteers can choose to ride the bus or take their own transportation to Calaway Park.

Students and parents will need to be aware of weather on this day and to dress appropriately. Sunscreen, hats, and proper walking shoes must be worn. If inclement weather is anticipated, proper attire should be brought and please note that each child is responsible for carrying their own backpack through out the day.

All children will be required to bring their own lunch and beverage to the park in a backpack. Opportunities to purchase treats will be provided by the parent volunteer however, some food should be sent from home. **Students can bring a maximum of \$10.00 for treat purchases and a visit to the candy store.**

The cost of this field trip is \$26.00 per student. If your child has a park pass, their cost will be \$6.00. Please send your Calaway Park Pass in one day before the field trip or if you are volunteering and have a pass, keep your child's with you on the day of the trip. **Approval slips and monies must be in no later than Monday, June 20th, 2016.** Please note that parents are encouraged to pay on School Cash for convenience. Just note the payment on your approval form.

Thanks for carefully reading this letter and attending to it quickly.

Sincerely,

The Elementary Team
The Elementary Team



Consent Form – All Field Trips
Teacher Lead, Parent/Guardian

FT 005

Teacher Leader Section

This is to advise that Cochrane Christian Academy School intends to involve your son/daughter in an off-campus activity. The particulars of the field trip are as follows:

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|-----------------------|---|
| Purpose: | End of the year field trip to build celebrate our year of learning |
| Destination: | Calaway Park |
| Arranged Supervision: | Teachers and Parent Volunteers |
| Date: | Wednesday, June 22nd, 2016 |
| Transportation Plans: | Southland Transportation |
| Risks or Dangers: | Transportation of children and inherent dangers riding carnival rides. |
| Costs (if any): | If student has park pass the cost is \$6.00. Without pass the cost is \$26.00 |

For additional information, please phone the school at (403) 932-5177.

If you permit your son/daughter to participate in this activity, please sign and tear-off the portion below and return it to the school.

Parent/Guardian Section

Please note that your child will NOT be allowed to participate in this field trip unless this form is signed and returned to the school prior to the field trip taking place.

FIELD TRIP CONSENT FORM

Having understood and signed the Annual Field Trip Authorization – Emergency Medical Information Form FT 001 and having read and understood the particulars of this Consent Form – All Field Trips FT 005, I consent to and give permission for my child to participate.

Child's Name: _____ Grade: 1/2
Destination: Calaway Park Date of Field Trip: June 22, 2016
Method of Payment (if applicable): _____
If payment online, confirmation number is: _____

Parent/Guardian Signature _____

Date _____

VOLUNTEER SECTION

Would you like to volunteer for this field trip? ☐ Yes ☐ No

Your name: _____ Phone number: _____