

Sir Wilfrid Laurier Elementary School

7350 Laurel Street, Vancouver, BC V6P 3T9 Telephone: 604-713-4925 Fax: 604-713-4927

IN-CLASS EVENT INFORMATION

Date: February 21, 2022 -Dear Parent/Guardian: The purpose of this form is to inform you about a proposed in-class activity involving your child, and to seek your support and permission for your child to participate. Hands-on activities are part of the school program and they provide students with valuable learning experiences. However, should you not wish your child to participate in this activity; school staff will assign the student other learning activities at the school. The Vancouver Board of Education will not deny a child access to in-class activities because of financial hardship. DIVISION(S): 1,2,3,4,5,6,7,8,9,13,14 WILL BE: Participating in an in-class science workshop with Science Made Fun. DATE: One of the following dates: Feb. 28, Mar. 1, Mar. 3, or Mar. 4 FROM: Each class will have a 75-minute workshop. SPECIAL INSTRUCTIONS: The workshop will take place in class and will be led by an instructor from Science Made Fun. (All educational visitors to school will follow the Health and Safety protocols as guided by the school district). EDUCATIONAL PURPOSE: To enhance our science units with hands-on learning activities. \$9 per child VOLUNTEERS NEEDED: ___ None While school staff will take reasonable steps to prevent injuries to students, some degree of risk is inherent in the nature of this activity, and may occur with or without fault on the part of the student, school board, its employees or agents, or the facility where the activity is taking place. By allowing your child to participate in this activity, you are agreeing that the activity described above is suitable for your child, and that there is a risk of injury associated with the activity. Mr. Fisher & Mr. Hong Ohn Parent/Guardian Statement: , give permission for _____, in Division to participate in an in-class science workshop. I have paid \$9.00 online to cover the cost of this in-class activitiy. Signature of Parent/Guardian _ Date: