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## **After School Yoga is Back Again!**

Dear Families,

Beginning Wednesday, May 4<sup>th</sup> and continuing every Wednesday until Wednesday, June 22<sup>nd</sup>, yoga classes will be offered after school at West Boundary.

The program will continue to incorporate a traditional Eastern Indian approach along with an Indigenous influence in the practice and teaching of yoga, all along with having fun! It will be open to all students of West Boundary.

If you would like to participate, please sign and return this new form to the school asap. There is no cost for this program. Yoga mats will be provided but an extra after school snack is essential.

If you have any questions or concerns, please do not hesitate to contact either April Borgnetta (instructor) at 250 848 210 or Nick Bond (principal) at 250 446 2724.

Yoga will begin at 4:00pm and **pick up is at 5:00pm.**

Namaste!

- West Boundary Elementary

APPENDIX C

SCHOOL DISTRICT NO. 51
PARENT CONSENT FOR FIELD TRIPS
STUDENT ACTIVITY / FIELD TRIP

West Boundary Elementary School is planning the following student activity/activities. Your written permission is required by the school if your child is to attend.

Description of the activity: Yoga

Special Requirements/Equipment: After school snack

Location of Activity: West Boundary Elementary

Town: Rock Creek

Dates(s): Wednesdays from May 4th to June 22nd 2022

Mode of Transportation: Pick up from families at 5pm - if you make 'other arrangements, you must notify the school

Accommodations: N/A

Field Trip Leader (must be staff member): Nick Bond

Chaperones:

Departure Time/Date: Yoga starts at 4pm

Anticipated Return Time/Date: Pick up from families at 5pm

If you have any questions at all regarding this activity, please contact the undersigned at 250 446 2724.

Accidents can be the results of the nature of the activity and can occur with or without any fault on either the part of the student, or the School Board or its employees or agents, or the facility where the activity is taking place. By allowing your son/daughter to participate in this activity, you are accepting the risk of an accident occurring, and agree all these activities, as described above, are suitable for your child.

Field Trip Leader

Administrator

If you do not wish your child to accompany his or her class on this trip, please contact me and I will arrange alternate supervision.

I give (name of student) permission to participate in the field trip to WBES on Wednesdays (see above) I understand that my child may be exposed to certain risks while participating in this activity. Accidents and injuries may occur.

Consent/Waiver - Booster Seats:

- My child is over 9 years of age OR over 4'9" - no booster seat required
My child is over 18kg/40 lbs AND under 4'9" - booster seat required
My child will bring a portable booster seat that does not require installation into the driver's vehicle
My child does not have a car seat or booster seat that is appropriate for his/her age and weight. I request that the school provide an appropriate child car booster seat for my child.

Signature of Parent / Guardian

Date

Printed name of Parent / Guardian

Medical Number

Address of Parent / Guardian

Home/Work/Emergency Phone