

PHYSICAL EDUCATION INFORMATION AND INTRAMURAL INFORMATION/PERMISSION

Dear Parent/Guardian:

Physical activity is essential for healthy growth and development. Growing bones and muscles require not only good nutrition, but also the stimulation of vigorous physical activity to increase the strength and endurance necessary for a physically active lifestyle. Active participation in games, fitness activities, dance, gymnastics, and outdoor pursuits provides opportunities for students to discover and trust themselves and gain the confidence necessary to play and work co-operatively and competitively with their peers. Both curricular and co-curricular Physical Education programs provide opportunities for students to experience "the fitness feeling" and to help them understand and make decisions regarding personal fitness and the value of physical activity in their daily lives.

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Students will also have the classroom time (e.g.,		to participate in intramural activities that are offered outside of
). Permission is required for students to participate in intramural
activities.		

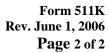
Please be advised that some Physical Education classes, Daily Physical Activity sessions and intramural activities, such as cross-country running, power walking, softball, and soccer, may take your child off the school grounds and into the immediate community. Supervision will be provided.

ELEMENTS OF RISK NOTICE

The risk of injury exists in every athletic activity. However, due to the very nature of some activities, the risk of injury may increase. Injuries may range from minor sprains and strains to more serious injuries. These injuries result from the nature of the activity and can occur without 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. The safety and well-being of students is a prime concern, and attempts are made to manage the foreseeable risks inherent in physical activity as effectively as possible.

It is important that your child participate safely and comfortably in the Physical Education, Daily Physical Activity and intramural programs. In your child's best interests, we recommend the following:

- a) Students should have an annual medical examination.
- b) Students should bring emergency medications (e.g., asthma inhalers) to Physical Education classes, Daily Physical Activity sessions and intramural activities.
- c) Appropriate clothing should be worn for safe participation (e.g., T-shirt, shorts or track pants, and athletic running shoes appropriate for the environmental conditions). Jewellery must be removed, if possible. Jewellery that cannot be removed and that presents a safety concern (e.g., medical alert identification or religious requirement) must be taped, or the activity must be modified.
- d) An eyeglass band and shatter-resistant/shatterproof lens should be worn if your child wears glasses that cannot be removed during Physical Education classes, Daily Physical Activity sessions and intramural activities.
- e) Attention should be paid to protection from environmental concerns (e.g., sun, hypothermia, dehydration, frostbite, and insect bites and stings).
- f) Safety inspection should be done at home of any equipment brought to school for personal use in class and intramural activities (e.g., skis, skates, helmets).
- g) When it is necessary to use a water bottle, students should use a personal water bottle that is not shared.





Please sign and return the Physical Education Acknowledgement of Risk section below. If you anticipate that your child/ward will be participating in intramural activities, please also sign and return the Intramurals Activities Permission section.			
PHYSICAL EDUCATION ACKNOWLEDGEMENT O	OF RISK		
In signing this form, I acknowledge the information about the elements of risk noted in the letter attached to this form (Form 511K: Physical Education Information and Intramural Information/Permission). I/we also acknowledge that some Physical Education activities, including Daily Physical Activity sessions, will occur in the immediate community.			
Name of Student:	Grade/Class		
Name of Parent/Guardian:	(please print)		
Signature of Parent/Guardian:	Date:		
INTRAMURAL ACTIVITIES PERMISSION			
I/we give permission for my child/ward,	ements of risk noted in the letter attached to this form		
Name of Parent/Guardian:	(please print)		
Signature of Parent/Guardian	Date		