



- I have considered the appropriateness of the adventure education activity and there are clear curriculum links.
- I have considered the risks involved with the adventure education activity.
- The trip is covered by the school insurance plan (for questions please consult the Director of Finance and Operations).
- There is an approved ratio of qualified and informed chaperones to students.
- I have a copy of the list of participants, chaperones and other staff members and their Emergency medical forms and contact information, as well as permission forms.
- I am aware who the School Site Contact Person is.
- I have reviewed and approved the Adventure Education Trip Plan.
- The trip complies with Transportation Policy 202.1.
- I have a copy of the location and contact information for the trip.
- I am aware that all participants and participants' parents/guardians have been informed of the nature and location of the activity, the consequences of inappropriate behaviour, the inherent risks involved, what to bring and given the contact information for the school site person.
- I have reviewed and approved the qualifications of the Trip Leader.

**I certify that the above has been completed in full:**

\_\_\_\_\_  
(Principal's signature)

\_\_\_\_\_  
(date)