



Our Lady Of Victory School

249 Arnold Avenue
Winnipeg, Manitoba R3L 0W4
Phone: 204-452-7632 Fax: 204-453-3081
E-Mail: olv@victoryedu.com Web page: www.victoryedu.com

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO PARTICIPATES AND BY A PARENT OR GUARDIAN OF THE PARTICIPATING STUDENT.

February 2nd, 2026

Dear Parents/Guardians:

Mrs. Moran’s grade 7/8 students will be participating in a volunteer program at The Convalescent Home of Winnipeg, care facility, through a partnership with the Catholic Health Association of Manitoba (CHAM). The goal of this program is to foster intergenerational connection and service, reflecting the school’s faith-based mission of compassion and community engagement.

- Details - Location: The Convalescent Home of Winnipeg (TCHW), 276 Hugo St. N, Winnipeg
- Dates: February 27 and/or March 27, 2026 @ 12:30-2:30pm (The class will be split in half.)
 - Activities: Engaging with residents through games, crafts, music, conversation, and other approved non-clinical activities.
 - Transportation: Transportation to and from TCHW will be provided by school bus and paid for by CHAM through the New Horizons for Seniors Program.

ELEMENTS OF RISK

Educational activities such as this involve certain elements of risk. Accidents may occur while attending this activity. These accidents may cause injury. Potential hazards may include but are not limited to the following:

- Hazards due to being transported
- Falling or tripping from walking/running
- Bumps or bruises due to carelessness

These accidents result from the nature of the activity and can occur without any fault on either the part of the student, or the School or its employees or agents, or the facility where the event is taking place. By choosing to participate in the activity, you are assuming the risk of an accident occurring. The chance of an accident occurring can be reduced by carefully following instructions at all times while engaged in the activity.

Please understand that you will bear the responsibility for any accident that might occur. Our Lady of Victory School does not provide any accidental death, disability, dismemberment or medical expenses insurance on behalf of the students participating in this activity. CHAM, Our Lady of Victory School, and TCHW are not responsible for loss of personal items during participation.

Sincerely,
Mrs. Moran
Grade 7/8 teacher

Please return the permission slip by February 20th, 2026.

ACKNOWLEDGMENT

We have read the above; we understand that in participating in the field trip, we are assuming the risks associated with doing so.

I give _____ permission to travel to the Convalescent Home of Winnipeg.
(name of student)

Signature of Parent/Guardian: _____ Date: _____