



PEEL ELEMENTARY OCCASIONAL TEACHERS' LOCAL

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PLEASE COMPLETE THIS FORM AND RETURN TO PEOT

I, _____ (please print name), acknowledge that I have read and understood the following with respect to attending PEOT social excursions for the 2015/2016 school year.

I understand that every excursion has an element of risk and that the decision to participate is a personal decision and that in the case of an accident, loss or injury, the Peel Elementary Occasional Teachers' Local will not be held responsible for any liability and/or expenses, including any medical expenses which may arise out of an excursion.

I understand and acknowledge that PEOT will not accept responsibility for any money not refunded by the excursion service provider should I decide not to travel on the excursion.

I understand that if I am unable to complete an excursion that I am on, it is my personal responsibility to ensure I return home safely.

SIGNATURE

DATE