

B4:1 School Operations – Field Trips Educational Field Trips Page 1 of 18

## 1. Purpose:

To allow for educational field trips to enhance learning opportunities for students and provide valuable educational experiences beyond the classroom.

## 2. Definitions:

- 2.1 *Field Trip* An approved school activity authorized by the Principal that occurs outside of school property, usually a visit to established community or educational program sites such as a museum or theatre which begins and ends on the same day.
- 2.2 *Excursion* Usually involves travel to a greater distance and/or for a longer period of time than field trips. Skiing trips, camping or water activities for which medical or back-up facilities may be at some distance, are included.

### 3. Administrative Procedures:

- 3.1 The Principal must grant approval in principle before any specific planning for the educational field trip commences.
- 3.2 Pre-trip visits are strongly encouraged to any planned local destinations, where possible, to inspect and familiarize with the local environment and equipment to ensure that the supervisors know how to accommodate the group travelling.
- 3.3 All field trips or excursions must be open to all students. For this reason, a fundraising component must be part of the planning to ensure that all students have equal opportunity in the participation of this excursion.
- 3.4 The Principal must adhere to disallowed travel destinations, elementary school activities restrictions and secondary school activities restrictions as outlined in *Restrictions on School Excursions and Activities Appendix A* (attached).
- 3.5 The Principal must grant approval for any one-day out-of-school trip.
- 3.6 The School Superintendent must grant approval for field trips of more than one day and for all excursions outside the Board jurisdiction (see Form C and D).
- 3.7 The principal must ensure that all OPHEA requirements have been reviewed (Form C).
- 3.8 When planning field trips or excursions involving a physical activity, the following resources must be consulted to ensure minimum safety guidelines are adhered to:
  - a) Ontario Physical Education Safety Guidelines (OPHEA) (*see Appendix B*)
  - b) CDSBEO Administrative Procedure B4:2 Ski Trips and Ski Activities



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3.9 The principal must ensure that all students, teachers/volunteers wear approved snow sport helmets when they are supervising/participating in all winter sporting activities.

All participants must wear a approved hockey helmet for hockey games, broomball games, ringette, etc.

When skiing/snowblading or snowboarding at facilities both within and outside of Ontario a properly fitted (as per manufacturer's guidelines) and properly worn snow sport helmet certified by a recognized safety standards association (e.g. ASTM F2040, CEN 1077, Snell RS98, CSA Z263.1) must be worn.

For further information and useful tips for trip organizers, please refer to the following link https://www.osbie.on.ca/pdf/English-Ski-Package.pdf

## 4. Consent Form:

- 4.1 Written parental consent is necessary for pupil participation in all field trips.
- 4.2 Prior to obtaining consent of parents or guardians the supervising teacher shall inform parents or guardians of trip details.

These details include:

- program rationale
- dates
- departure, return time and pick up arrangements
- cost
- method of transportation
- destination
- elements of risk
- 4.3 No student may participate without an appropriately signed consent form.

4.4 Consent forms are retained at the school until completion of the trip.

## 5. Student Safety:

- 5.1 The supervisor shall be familiar with the environment and the equipment to which the students will be exposed.
- 5.2 The teacher should be aware of any health or emotional problems for each individual student.



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- 5.3 A set of safety rules and an adequate emergency response plan should be established and be publicized to students and parents before the trip begins.
- 5.4 When a water activity is to be part of the program, the appropriate guidelines must be adhered to. Please refer to <u>http://safety.ophea.net/</u> for specific guidelines.

## 6. Student Supervision:

6.1 The Board leaves the number of teachers and adult volunteers to be assigned to the discretion of the Principal, based on the number of students, their age, their abilities, their experience level, and the nature of the activity. It is suggested that the ratio of persons assigned be on a sliding scale according to the grade of the student.

	Adult/children
K - 3	1:8
4 - 6	1:10
7 - 8	1: 12
9 – 12	1 adult/class

## 7. Transportation: Management Safety Guidelines

- 7.1 The Catholic District School Board of Eastern Ontario does not take responsibility for students traveling by private vehicle to field trips. To the extent possible and whenever reasonable, transportation for field trips will be provided by charter or commercial carrier.
- 7.2 For any trip involving a privately-owned vehicle to transport students:
  - 7.2.1 The automobile owner's personal insurance will be the first coverage in effect
  - 7.2.2 Insurance must cover personal liability and property damage to a minimum limit of \$1,000,000 per occurrence if used on a regular basis.
  - 7.2.3 The Catholic District School Board of Eastern Ontario carries additional liability insurance, which covers claims in excess of the owner's limits.
  - 7.2.4 If a Board employee transports students as a usual practice, it is advisable that the employee informs the insurance agent to ensure the inclusion on the personal insurance policy.
  - 7.2.5 If the use of the personal vehicle to transport students is infrequent or occasional, then the personal automobile insurance policy will likely extend coverage to the vehicle owner. It is recommended to check with your automobile insurer to confirm.



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## 8. Nominal Roll of Students:

- A nominal roll of participating students is prepared.
- On the day of departure, the nominal roll is adjusted for attendance
- The nominal roll must accompany the teacher in charge. It must be checked against medical records making specific notations of students with allergies and medical problems which may require emergency treatment, i.e. bee stings, peanut butter, diabetes, hemophilia, asthma, etc.

## 9. Student Conduct:

Students will conduct themselves in a manner which shows respect for their teachers and fellow students. It is understood that school regulations are in effect at all times during a field trip. The Principal has the right to exclude any student from a field trip for cause. Please refer to and review procedure B2:1 Code of Conduct – Standards of Behavior.

### **10.** Untoward Incidents During the Trip:

A supervisor, using good judgment and proper planning, will be able to minimize the undesirable effects of untoward incidents. Contact with the news media should be avoided. When the supervisor in charge is in doubt of the appropriate action, the supervisor must consult with the Principal, who may consult with the Regional Superintendent or Director of Education.

All untoward incidents are to be reported to the Principal no later than the first school day following the trip.

## 11. Custody of Students on Return:

11.1 If the group returns to the school after normal bus departure time, the supervisor in charge is responsible for the safety of the students as follows:

<u>Elementary Students (JK-8)</u>: for ensuring the safe return of students to parents or responsible designate. Students are not to be left at the school on the understanding that arrangements have been made.



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<u>Secondary Students (9-12)</u>: for ensuring that arrangements have been made for the safe return to their residence.

## 12. Forms:

Informed Consent/Permission Form (Students under 18 years) (Form A) Informed Consent/Permission Form (Students over 18 years) (Form B) Field Trip/Outdoor Education Activity Authorization Form (Form C) Intent to Participate in a Field Trip Outside of Board Jurisdiction (Form D) Volunteer Driver - Authorization to Transport Students (Form E) Parental Consent and Authorization for Medical Treatment (Students under 18) (Form F) Parental Consent and Authorization for Medical Treatment (Students over 18) (Form G)



#### \*SAMPLE\*

#### **INFORMED CONSENT/PERMISSION FORM FOR EDUCATION TRIPS**

(Students Under 18 Years)

To complete the form based on school activity please refer to the following link https://www.osbie.on.ca/risk-management/manual/InformedConsensts.aspx

The \_\_\_\_\_\_

\_\_\_\_\_is arranging

(name of school)

(Description of activity and dates)

# THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.

#### **ELEMENTS OF RISK:**

Educational activity programs, such as \_\_\_\_\_\_ involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury which may result from participating in \_\_\_\_\_\_:

(describe activity)

1			
2.			
3			

The risk of sustaining these types of injuries result from the nature of the activity and can occur without any fault of either the student, or the school board, its' employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured.

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

If you choose to participate in \_\_\_\_\_\_ on \_\_\_\_\_, you must understand that you bear the responsibility for any injury that might occur.

The \_\_\_\_\_\_ does not provide accidental death, disability, dismemberment or \_\_\_\_\_\_ (name of school board)

medical expense insurance on behalf of the students participating in this activity.

#### ACKNOWLEDGEMENT

WE HAVE READ THE ABOVE. WE UNDERSTAND THAT IN PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.

 Signature of Student:
 Date:

 Signature of Parent/Guardian:
 Date:

#### PERMISSION

**Revised January 2020** 

I give	_ permission to participate in the	
(name of student) (description of activ	ity)	
to be held on or about		
(date)		
Signature of Parent/ Guardian:	Date:	
September 2018		

FORM 'B'
*SAMPLE* RELEASE AND INDEMNIFICATION FORM FOR EDUCATION TRIPS (Students/Participants over 18 Years)
The
(name of school board) to its students on or about
(describe activity)
THIS FORM MUST BE READ AND SIGNED BY ALL STUDENTS/PARTICIPANTS WHO WISH TO GO.
ELEMENT OF RISK
Educational activity programs, such as, present various elements of risk. Accidents resulting from such activities may occur and cause injury. The risk associated with the activity MUST be assumed by the participants.
ACKNOWLEDGEMENT I,, understand and accept the above and provide the
(name of School Board)
with the following waiver of liability and indemnification agreement:
RELEASE AND INDEMNIFICATION AGREEMENT
I,, hereby release the
(name of school board) and its staff and agents from any and all liability for any injury sustained by me, regardless of how caused, resulting from my participation in the arranged through the on or (describe activity) (name of school board)
(describe activity) (name of school board) about (date)
I further agree to indemnify and save harmless the (name of school board) and its staff and agents from any and all suits, demands, torts, and actions of any kind which may be brought against its staff or agents for which it/they may become liable by reason of any injury, loss, damage or death resulting from, or occasioned to, or suffered by any person or any property, by reason of any act, neglect or default of mine.
Signature of Student/Participant:
Date:



## Field Trip/Outdoor Education Activity Authorization Form

By completing this form, the lead teacher of the field trip or outdoor education activity acknowledges that he/she has reviewed and satisfied the safety guidelines found at <u>http://safety.ophea.net/</u> for the particular activity/activities that students will be partaking in.

Teacher Name: \_\_\_\_\_

(Please Print)

Description of Field Trip or Outdoor Education Activity:

Date of Field Trip or Outdoor Education Activity:

In detail, please describe the steps you have taken that meet the OPHEA requirements:

## SIGNATURES:

(if additional space is required, please continue on other side ...)

My signature acknowledges that I have read and reviewed the safety guidelines at <u>http://safety.ophea.net/</u>, pertaining to this field trip/outdoor education activity, and that all safety requirements have been met.

(Teacher Signature / Date)

My signature indicates my approval that all requirements are being met based on OPHEA and the BOARD policy:

(Principal Signature / Date)

(Please keep one copy of this form on file in the school, and send one copy to Supervisory Officer) September 2018 Revised January 2020



Continued from previous page

In detail, please describe the steps you have taken that meet the OPHEA requirements:

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OUTSID	PARTICIPATE IN A FIELD TRIP DE OF BOARD JURISDICTION t of Kingston, Out of Province)	FORM 'D'
<ol> <li>Complete the form</li> <li>Secure approval of the Principal</li> <li>Send to the Regional Superinten</li> <li>Presented at Executive Council to</li> </ol>	dent of Education	
School:	Teacher(s) in Charge:	
Grade(s):		
Date of Departure:	Date of Return:	
Destination:	Phone No.: # of School Days	
No. of Students Traveling Cost p	er Student:	
Estimated Fundraising per Student:		
Total Student Contributions:\$Total Fundraising:\$Total School Contribution\$Other Contributions:\$		
Course(s) Related to the Trip:		
Link to Curriculum:		
Transportation provided by: Co	ach Airline	
Name of Provider:		
Travel Providers Consulted (minimum 2 qua	otes required)	
Name:	Quoted Price:	
Name:	Quoted Price:	
September 2018 Revised January 2020		

				FO	RM 'D' (cont'd)
Chaperones/Coaches:	<u>Staff</u>		Non	-Staff	
Male:					_
Female:					_
Supervisors: Supervisors must include at le Proper supervision is best achi Opportunities to participate in extended to volunteers. Volur or family members related to a Council. Where an outside vol current criminal record check excursion.	eved when the supe an international exc nteers should not be any of the trip partici- unteer is selected to	rvisor knows the cursion should fir direct family men ipants, exception participate in an	students par st be extended mbers of any s will be revi internationa	ticipating on the ed to all school s of the selected s iewed for approv l excursion, they	excursion. taff before being staff supervisors val by Executive v must present a
Overnight supervision provide	d by an external pro	ovider?	Yes	/ No	
If yes, provider name:					
Please check that the following	g items are:	On File At Sch	nool Acco	ompany the Tead	cher in charge
Parental Consent			_		
Detailed Itinerary and Program	n Description				
First Aid Kit			_		
Medical Insurance for Out-of-	Province		_		
Communication Plan					
Code of Behaviour					
List of Participants					
Overnight Supervision Plan / S	Schedule				
Principal Approval/Signature:			Date:		
Superintendent Approval/Sign September 2018 Revised January 2020	ature:		Date:		



FORM 'E'

## **VOLUNTEER DRIVER - AUTHORIZATION TO TRANSPORT STUDENTS**

## Part A

This will authorize \_\_\_\_\_\_\_(*Name of teacher or other volunteer driver*)

1. To transport students participating in the events listed on the attached school schedule, OR

2. To transport students participating in the following school activity:

3. Vehicle Information: MAKE:\_\_\_\_\_YEAR:\_\_\_\_LICENCE #: \_\_\_\_\_

Date School Name Principal's Signature

NOTE: ALL "TRIP DRIVERS", INCLUDING VOLUNTEER DRIVERS ARE ADVISED THAT, IN ORDER TO BRING INTO EFFECT THE BOARD'S EXCESS LIABILITY INSURANCE, THEY MUST:

(A) Use a licensed automobile which carries valid automobile Third Party Liability insurance as required under Ontario legislation;

(B) Provide the school board with prompt written notice, with particulars, of any accident arising out of the use of a licensed automobile during a trip on board-related business;

(C) Be aware that the school board's Excess Automobile Liability insurance comes into effect only after the vehicle owner's primary Third Party Liability insurance limit has been exhausted;

(D) Be aware that any damage to the volunteer's vehicle, the cost of any insurance deductible or premium adjustment as the result of an accident while the vehicle is being used on boardrelated

business is NOT covered by the school board's Excess Automobile Liability insurance.

(E) Be aware that if the vehicle is equipped with passenger-side airbags, children under 12 years should not

be permitted to ride in the front seat. (See vehicle manufacturer's recommendation.)

N.B. A "trip driver" is defined as any person authorized by the board who has agreed to be a driver for a certain trip while they are driving their own or another licensed automobile. This includes, but is not limited to: Trustees, employees, teachers, parents, volunteers, officials of the school board.

### DECLARATION TO BE SIGNED BY DRIVER

- I declare that I hold an unrestricted driver's license and am authorized to drive in Ontario, and my

vehicle is insured by a valid automobile liability insurance policy as required by Ontario law.

- I declare that the vehicle described above is mechanically fit and that there are seat belts in working condition for all passengers.

Signature Date

## DECLARATION TO BE SIGNED BY OWNER (IF DRIVER DOES NOT OWN THE VEHICLE)

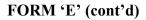
- I declare that I have authorized \_\_\_\_\_\_ to drive my vehicle to transport students

participating in the school event(s) listed on this form.

- I declare that he/she holds an unrestricted driver's license, is authorized to drive and is insured as an operator under the vehicle's liability insurance.

- I declare the vehicle described above is mechanically fit and that there are seat belts in working condition for all passengers.

Signature Date See Part B (next page)





## Volunteer Driver - Authorization to transport students Contd. Part B

## SUMMARY OF INSURANCE

#### (1) Volunteer Supervisors on School Premises

The school board's Liability insurance policy protects both staff and volunteers who are working within the scope of their duties for the board. This coverage responds to law suits that are brought against staff or volunteers who are supervising school events and provides protection up to \$24 million for each occurrence.

#### (2) Volunteer Drivers for School Activities

Ontario legislation makes automobile insurance compulsory in the Province of Ontario. The same legislation makes the owner's insurance primary coverage in the event of an accident - in other words, the insurance carried on the vehicle responds first.

If a vehicle which is not owned by the school board is being operated by a volunteer or any other board employee for approved school activities, the board's Non-owned Automobile Insurance endorsement will respond to Third Party Liability claims in **excess** of the owner's insurance limit up to a total combined limit as stated in the Non- owned Auto policy. There is no coverage provided by the school board's insurance for damage to volunteer's or employee's vehicles while they are being operated for board activities.

According to Provincial legislation, passengers who are injured would recover Accident Benefits coverage from their own or a parent's automobile policy. In the absence of a personal or family automobile policy, the passenger would then be eligible to recover benefits from the insurance policy covering the vehicle in which they were riding.

#### (3) Personal Automobile Insurance Coverage

For the personal protection of volunteer drivers, it is recommended that drivers carry a minimum of \$1 million of Third Party Automobile Liability insurance. Volunteers and board employees who use their personal vehicles for transporting *students to school activities should advise their insurance carrier*.

DADENTAL CONCEN	FORM 'F'
<u>FARENIAL CONSEN</u>	<u><b>T AND AUTHORIZATION FOR MEDICAL TREATMENT</b></u> (For Students under 18 years of age)
Child's Information	
Child's name	Date of Birth
Address (Civic and Street Name)	Home phone number
City and Postal Code	
Parental Contact	Phone number (work and/or cell)
Supervising Teacher Information	
Supervising Teacher's name	Supervising Teacher's name
Parental Authorization	
one or both of the above-named Supervising T medical procedures (including administration of which, in the opinion of a licensed medical pra	bove-named child, am not available* to provide or refuse consent, I hereby authorize eachers to provide consent for all medical and/or surgical treatment and/or other of anesthesia, blood transfusions, diagnostic tests, etc.) for the above-named child ctitioner, are necessary to protect the physical health of the above-named child. This until
authorization shall be effective from	
*In accordance with the definition provided in	the <i>Health Care Consent Act, 1996</i> (the "Act"), a person is "available" if it is possible, ances, to communicate with the person and obtain a consent or refusal.
*In accordance with the definition provided in within a time that is reasonable in the circumst Note: Pursuant to the <i>Act</i> , consents are not r the child's behalf will prolong the suf	ances, to communicate with the person and obtain a consent or refusal. equired if there is an emergency and the delay required to obtain a consent or refusal or
*In accordance with the definition provided in within a time that is reasonable in the circumst Note: Pursuant to the <i>Act</i> , consents are not r the child's behalf will prolong the suf	ances, to communicate with the person and obtain a consent or refusal. equired if there is an emergency and the delay required to obtain a consent or refusal or fering that the child is apparently experiencing or will put the child at risk of sustaining
<ul> <li>*In accordance with the definition provided in within a time that is reasonable in the circumst.</li> <li>Note: Pursuant to the <i>Act</i>, consents are not r the child's behalf will prolong the sufficient serious bodily harm. Medical practition</li> </ul>	ances, to communicate with the person and obtain a consent or refusal. equired if there is an emergency and the delay required to obtain a consent or refusal or fering that the child is apparently experiencing or will put the child at risk of sustaining oners in other jurisdictions are likely subject to similar provisions.



### FORM 'G'

#### CONSENT AND AUTHORIZATION FOR MEDICAL TREATMENT

(For Students 18 years of age and over)

Student's	s Infor	mation

Student's name

Address (Civic and Street Name)

Date of Birth

Home phone number

City and Postal Code

Parent/Guardian

Phone number (work and/or cell)

**Supervising Teacher Information** 

Supervising Teacher's name

Supervising Teacher's name

#### **Consent and Authorization**

In the event that I, the above-named student, am unable to provide or refuse consent, I hereby authorize my above-named parent/guardian to provide consent for all medical and/or surgical treatment and/or other medical procedures (including administration of anesthesia, blood transfusions, diagnostic tests, etc.) for me which, in the opinion of a licensed medical practitioner, are necessary to protect my physical health. In the event that my said parent is not available\* to provide such consent, then, in that event, I authorize one or both of the above-named Supervising Teachers to provide such consent in the place of my parent. This authorization shall be effective from \_\_\_\_\_\_\_\_\_.

\*In accordance with the definition provided in the *Health Care Consent Act, 1996* (the "*Act*"), a person is "available" if it is possible, within a time that is reasonable in the circumstances, to communicate with the person and obtain a consent or refusal.

Note: Pursuant to the *Act*, consents are not required if there is an emergency and the delay required to obtain a consent or refusal on the student's behalf will prolong the suffering that the student is apparently experiencing or will put the student at risk of sustaining serious bodily harm. Medical practitioners in other jurisdictions are likely subject to similar provisions.

Student

Date

Parent/Guardian (circle one)

Date

Witness - Print name:

Date



## Appendix A – Restrictions on School Excursions and Activities

\* For participation in an activity not specifically covered in this list, permission of the area superintendent is required.

## 1. Activities NOT Recommended at the Elementary Level

The following activities are not recommended at the elementary level. Written permission from the area superintendent is required for any of the following activities:

- Wave pools
- Canoeing
- Rock climbing
- Sailing
- Winter tent camping

\*Some Climbing walls and rope courses are considered appropriate activities for elementary schools, as outlined by OPHEA.

## 2. Activities NOT Allowed at the Elementary Level

The following activities are not allowed at the elementary level at any time:

- White water canoeing
- White water kayaking
- Diving tanks
- Scuba diving
- Cricket
- Baseball (hardball)
- Cheerleading (acrobatic)
- Tackle football
- Martial arts
- Tackle rugby
- Discus
- Pole vault
- Firing ranges
- Archery
- Skydiving

- Wilderness camping
- Paint-ball warfare games
- Snow blading
- Cliff rapelling
- Hot-air balloon rides
- "Swimming parties" at private or nonregulated pools, rivers or lakes
- Bungee jumping
- Downhill mountain biking
- Para-sailing
- Hang gliding
- Fireworks or other pyrotechnic devices
- Ziplining
- 3. Activities NOT Recommended at the Secondary Level

The following activities are not recommended at the secondary level. Written permission from the area superintendent is required for any of the following activities:

- Archery
- Canoeing
- Rock climbing
- Sailing
- Winter tent camping

## 4. Activities NOT Allowed at the Secondary Level

The following activities are not allowed at the secondary level at any time:

- White water canoeing
- White water kayaking
- White water rafting
- Scuba diving
- Skydiving
- Para-sailing
- Hang gliding
- Bungee jumping
- Downhill mountain biking
- Hot-air balloon rides
- Snow blading
- Cliff rapelling
- Firing ranges
- Paint-ball warfare games
- "Swimming parties" at private or non-regulated pools, rivers or lakes
- Use of fireworks or other pyrotechnic devices

## **APPENDIX B – Ontario Physical Education Safety Guidelines**

# It is extremely important that schools ensure they adhere to the most current OPHEA Safety Guidelines, which are available on the OPHEA website.

Based on OPHEA, "it is the educator's/coach's/intramural supervisors' responsibility to review the most recent versions of the Safety Guidelines (Generic Section, activity pages and Appendices) at <u>http://safety.ophea.net</u> or via the current version of the Safety Guidelines app. These documents inform the implementation of activities in Health and Physical Education classes, curricular field trips (that involve physical activity), inter-school practices and competitions and intramural clubs/activities."

Updated Ontario Physical Education Safety Guidelines are available online at:

### ELEMENTARY: http://safety.ophea.net/elementary

Physics Physics	Ontario sical Education ety Guidelines		
Elementary	Secondary	Ask the Expert & FAQs	Concussions
Curricular Interschool Intramural	Elementary Currico physical activity (e Elementary Interso instructional time; Elementary Intram	appropriate module. ular: This module focuses on classroom instruction in ph e.g. outdoor education facility, swimming at a hotel poor chool: This module focuses on school sponsored, compet ; involve a selected school team/group; involve a component pural: This module focuses on school sponsored physical ponal time; not a selected school team/group; not a comp	ol on a graduation trip, etc.). titive programs which: occur outside students' etition against an outside team/group. /recreation activities which are: outside the

## SECONDARY: http://safety.ophea.net/secondary

ementary	Secondary	Ask the Expert & FAQs	Concussions
rricular	Seconda	-y	
erschool ramural	Secondary - Curric physical activity ( Secondary - Inters instructional time Secondary - Intran	appropriate module. ular: This module focuses on classroom instruction in phy e.g. outdoor education facility, swimming at a hotel pool chool: This module focuses on school sponsored, competi i involve a selected school team/group; involve a compet nural: This module focuses on school sponsored physical/r ponal time; not a selected school team/group; not a comp	on a graduation trip, etc.). tive programs which: occur outside students' ition against an outside team/group. recreation activities which are: outside the