



## St. Aloysius Gonzaga Secondary School

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2800 Erin Centre Boulevard, Mississauga, Ontario L5N 6R5 (905) 820-3900

Friday November 25, 2011

Dear Parent/Guardian,

An integral part of the Prefect organization and of our leadership development program at St. Aloysius Gonzaga involves our students participating in a series of mandatory Prefect Leadership Retreats. On Friday November 25th, all Gonzaga Prefects will arrive at Gonzaga at **5:45 pm** and participate in a number of team building, faith strengthening and leadership activities and exercises. The evening will be concluding at 12:00 am and students will require transportation home from the retreat. If you give permission for your son/daughter to be driven home by someone else, please state this in the space provided at the bottom of this form.

The retreat will be organized and presented by a number of staff members. Students are asked to wear comfortable clothing, bring snacks and drinks, pen and paper, and a positive attitude. Students **CANNOT** bring any electronic devices with them to the retreat.

We feel that these activities will assist the Prefects in their leadership and faith development. They will gain a better appreciation of what it means to be a leader and develop skills that we hope will last their whole life. Please sign the permission slip below and have your son/daughter return it to Mr. Burnham or Mr. Eagles.

Feel free to contact either one of us with any questions you may have.

Peace,

Mr. Matt Burnham  
Teacher  
905-820-3900 ext 70131

Mr. Jason Eagles  
Guidance Counsellor  
905-820-3900 ext 70016

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I give my son/daughter \_\_\_\_\_ permission to attend the Prefect Overnight Leadership Retreat at St. Aloysius Gonzaga on Friday November 25, 2011.

Educational activity programs such as retreats may present various elements of risk. Incidents related to such activities may occur and cause injury through no fault of the school board or the facility at which the retreat is being held. The participant must assume these risks. The Dufferin-Peel C.D.S.B. does not provide any accidental death, disability, dismemberment or medical expenses insurance on behalf of student's participation in this activity.

Parent/Guardian's Signature \_\_\_\_\_

Student's Health Card Number: \_\_\_\_\_

Emergency Name and Number: \_\_\_\_\_

Concerns & Food Allergies: \_\_\_\_\_

- I give my son/daughter to be driven home from the retreat by \_\_\_\_\_
- I will be picking up and driving my son/daughter home from the retreat.