

---

# SCHOOL DISTRICT 43 (COQUITLAM)

---

## **BCIT JILL OF ALL TRADES 2025 APPLICATION DUE FRIDAY MARCH 7, 2025**

The Jill of All Trades is a hands-on, in-the-shop event designed for students in Grades 9-12 who identify as female or are gender diverse. This event aims to inspire students to explore careers in the Skilled Trades. Participants will get a behind-the-scenes look at BCIT's state-of-the-art facilities, interact with industry professionals, and engage in a series of interactive workshops across various trades.

**Event Date: Thursday April 10, 2025 approx. time: 8:00-3:00PM**

Applications for the Jill of All Trades Sampler must be printed and submitted as a hard copy. Electronic applications will not be accepted.

Please complete the following and submit everything in a single package to your **Post Secondary School Advisor by 3:00 PM on Friday, March 7, 2025.**

- Student Information & Questionnaire
- SD43 Field Trip Consent Form
- BCIT Jill of All Trades Registration Form
- BCIT Media Release Form
- BCIT Liability & Assumption of Risk Form

**Student Information & Questionnaire - BCIT JILL OF ALL TRADES SAMPLER**

**Full Name:** \_\_\_\_\_

**Date of Birth (MM/DD/YYYY):** \_\_\_\_\_

**Gender:**  Male  Female  Non-Binary  Prefer not to say

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Current School Name:** \_\_\_\_\_

**Grade Level (current year):**  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup>

**What trades are you interested in? (Check all that apply)**

(Please select all that apply)

- Carpentry/Woodworking
- Culinary (Baking/Cooking)
- Metal (Welding, Sheet metal, Metal fabrication)
- Plumbing & Piping
- Electrician
- CNC Machinist
- Landscaping & Horticulture
- Other: \_\_\_\_\_

**Why are you interested in participating in the Jill of All Trades Program?**

(Briefly describe your reasons for applying)

---

---

---

---

---

---

---

If I am selected as a successful applicant, I understand that I am required to attend the event for its entire duration and actively participate in all activities organized by BCIT. I acknowledge that I will be using School District transportation to and from the event and will ensure timely arrival for departure. I commit to following all School District rules and expectations and agree to represent School District 43 in a positive and respectful manner.

**Signature of Applicant:** \_\_\_\_\_



1080 Winslow Avenue, Coquitlam, BC V3J 0M6 Phone 604-939-9201

**SCHOOL DISTRICT 43 (Coquitlam)**

**PARENT/GUARDIAN FIELD TRIP INFORMATION AND CONSENT FORM**

**Dear Parents / Guardians**

The purpose of this letter is to inform you about a proposed field trip involving your child and to seek your support and written permission for your child to participate.

Please note that participation in this activity is optional, but BCIT and School District No. 43 (Coquitlam) have partnered to create a wonderful opportunity to learn more about what each offers/supports in career preparation while in grades 10 - 12 and right after graduation.

While BCIT and Coquitlam SD43 staffs take all reasonable steps to prevent injuries to students, some degree of risk is inherent in any fieldtrip, but this will be in a conference room (classroom) setting where most of the activities will be watching presentations and participating in small groups discussions/activities.

By allowing your child to participate in this activity, you agree that the activity described above is suitable for your child and acknowledging that you understand there is a risk of injury associated with it.

If you have any questions, please feel free to contact Ben King, Principal of Career Programs, at 778-984-1354.

\_\_\_\_\_  
**Ben King**, Principal of Career Programs

\_\_\_\_\_  
**High School Administrator**, Principal or Vice Principal

**Date(s) of Field Trips:** Thursday April 10, 2025

**Start Time:** 8:00am **End Time:** 3:30pm **Approx. Travel Time:** 45- minutes

**Location of the Field Trip:** 3700 Willingdon Ave BCIT Burnaby Campus

**Nature of the Field Trip:** to explore trades. Students will participate in 4 different trades exploration activities, instructed by BCIT instructors. They will also get a tour of the campus and listen to a variety of speakers.

**Students will need to bring/consider:** Appropriate clothing for the shop setting. Athletic pants or jeans, long hair tied back and no jewelry. T-shirts are to be provided by BCIT.

**Teacher(s)/Administrator(s) in Charge:** Carol Martina (BCIT), BCIT Instructors, Ashley Impellezzere & Ben King

**Your child will be traveling by:** School District bus to and from BCIT.

**Food/Snacks:** Lunch and snacks provided by BCIT

**Cost of Optional Field Trip:** \$0

**Known Risks and Safety Information:** Students will be working with basic hand tools and shop equipment. Students will complete a safety orientation at the start of each session.



1080 Winslow Avenue, Coquitlam, British Columbia V3J 0M6 ☐ Phone 604-939-9201

SCHOOL DISTRICT 43 (Coquitlam)

## **PARENT/GUARDIAN FIELD TRIP INFORMATION AND CONSENT FORM**

### **Field Trip Name: "BCIT Jill of All Trades"**

Are there any **medical concerns** (allergies, diabetes, epilepsies...) that the BCIT or Coquitlam school staffs should be aware of surrounding your child's participation?

→ NO

→ YES, medical concerns are: \_\_\_\_\_

Are there any **physical concerns** (sprained ankle, limited lifting ability/amount) that the BCIT or Coquitlam school staffs should be aware of surrounding your child's participation?

→ NO

→ YES, physical concern is: \_\_\_\_\_

Besides the ones listed above, are there **any other concerns**, of any kind, that we BCIT or the Coquitlam SD should know about?

→ NO

→ YES, you should know: \_\_\_\_\_

My child (print name): \_\_\_\_\_ and I (print name): \_\_\_\_\_

understand that the Coquitlam School District's and your home school's "Rules and Code of Conduct" apply during the field trip. I will be responsible for any costs caused by my child's failure to abide by the Codes of Conduct, including any costs to send my child home. By signing below, I give permission for my child to participate in the field trip described above..

Date: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Parent/Guardian Phone Number: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_



# REGISTRATION FORM

Trades Access  
3700 Willingdon Avenue, Burnaby BC, Canada V5G 3H2



Welcome to Jill of All Trades, an all-day event led by female mentors to inspire young women or those who identify as female in Grades 9 through 12 to pursue careers in the Skilled Trades. Participants will experience a fun-filled day of practical, in-the-shop sessions.

All forms in the REGISTRATION PACKAGE are required by 4:00 PM on MONDAY MARCH 4, 2024:

1. REGISTRATION FORM
2. INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT
3. CONSENT AND RELEASE TO USE IMAGE

Please provide the information below.

School District #	
School Name	
Student Last Name	
Student First Name	
Student Grade	
Unisex T-Shirt Size	
Shoe Size	
Dietary Restrictions	
Teacher/Counsellor	

### SAFETY INFORMATION

Participants will be required to wear long pants (no sweatpants, yoga pants or shorts) and closed-toed shoes – runners or sneakers (no ballet flats, platforms, or sandals of any kind). BCIT will provide safety glasses and toe caps for use in the shops.

### REQUIRED FORMS TO BE SIGNED BY PARENT OR GUARDIAN

- INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT
- CONSENT AND RELEASE TO USE IMAGE



## CONSENT AND RELEASE TO USE OF IMAGE

### Corporate Services

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

Course/Program Name Jill of All Trades	Subject Description School Event
Shoot Location(s) BCIT Burnaby Campus	
Shoot Date(s) April 10, 2025	

The British Columbia Institute of Technology ("BCIT") is seeking your permission and consent to use still photographs, video footage and/or sound recordings created by BCIT and in which you appear (the "Images"). BCIT intends to use the Images for the purposes of BCIT programs and activities, including advertising, promotion, recruitment and marketing of BCIT, its educational programs and services (collectively the "Purposes").

By signing and submitting this Consent and Release to Use Image (the "Consent and Release"), you agree as follows:

- BCIT will have the unrestricted and irrevocable right (but no obligation) to collect, use, create, copy, disclose, modify, edit, rearrange, transpose, publish, display, distribute, disseminate and store the Images.
- BCIT may crop, alter or modify the Images, and combine any Images with other images, text and graphics, without notifying you.
- Your name and any other information provided by you to BCIT may be displayed in connection with the Images and you further consent to any of your personal information, including the Images, being stored, accessed or disclosed outside of Canada or posted online.
- The Images are the sole and exclusive property of BCIT. You agree to waive all rights you might have in the Images and their contents including any moral rights or rights to privacy, personality or publicity or any right to inspect or approve of them or of BCIT's use of them. You agree to sign any additional documents that may be required to allow BCIT to enforce, perfect or maintain its rights in the Images.
- You will not receive any compensation related to BCIT's exercise of any of its rights under this Consent and Release, regardless of how the Images or your image, name, voice or likeness are used, and BCIT has the right to benefit from, sell, transfer or release its rights in or to the Images, and you will not be entitled to compensation in connection therewith. <https://www.cleo.ca/>

By signing this Consent and Release, you further agree to release and discharge BCIT and its officers, employees and agents from any and all claims and demands arising out of or in connection with the creation, use, modification, reuse, publishing or republishing of the Images, including without limitation any and all claims for defamation or violation of any right of publicity or privacy or any other right arising from BCIT's exercise of any of the rights granted to it under this Consent and Release.

You confirm that you are 19 years of age or older and are competent to sign this Consent and Release in your own name. You have read and fully understand this Consent and Release prior to signing it. This Consent and Release shall be binding upon me and my heirs, legal representative and assigns. If any part of the Consent and Release is unenforceable it shall be severed, and the remaining provisions shall continue in full force and effect.

Name	BCIT ID Number (if applicable)	Date
Signature	Email	Telephone

If the Participant is under the age of 19 years, the Participant's Parent or Legal Guardian, by executing this form below, (the "Parent or Guardian") represents and warrants that the Parent or Guardian is the Parent or Legal Guardian of the Participant, has the legal authority to provide all Consents and Assumptions of Risk on behalf of the Participant, and does provide such Consents and Assumptions of Risk for both the Parent or Guardian, and on the Participant's behalf.

Parent/Guardian Name (if above is under 19 years of age)	Parent/Guardian Email	Parent/Guardian Telephone
Parent/Guardian Signature		

Privacy Notice: The information that you provide on this form is collected pursuant to section 26(d) of the Freedom of Information and Protection of Privacy Act (FIPPA). BCIT will use this information to retain and use the Images of you for the Purposes. We may contact you to discuss matters pertaining to the Images and images may be shared with BCIT employees for this purpose. Questions about this form or about the collection, use and storage and disclosure of personal information, please contact the Associate Director, Privacy, 3700 Willingdon Ave, Burnaby, BC, V5G 3H5, Email: [privacy@bcit.ca](mailto:privacy@bcit.ca) or Tel: 604.432.8508.





# INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT

Corporate Services

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

CLEAR FORM

I, \_\_\_\_\_ ("Participant"), acknowledge that I have voluntarily applied to participate in the following activities at British Columbia Institute of Technology ("BCIT"):

Activity Jill of All Trades	Date April 10, 2025
Time and Duration 8:00 AM - 3:30 PM	Location BCIT Burnaby Campus
Transportation	Supervision

I hereby acknowledge and accept the risks and dangers of participation in this activity, regardless of the nature of the injury/injuries I may receive and regardless of the manner in which they occur, which may include but are not limited to:

- **TERRAIN:** Any manner of injury resulting from falls on or from steep, slippery or uneven terrain. Injury or death may be caused by, but is not limited to making contact with fitness equipment, rocks, trees, ocean, obstructions and other participants, visible or non-visible.
- **WEATHER:** Injury or illness resulting from exposure to cold, wet weather or the effects of heat and strong sunlight or winds.
- **WILD ANIMALS:** Injury resulting from interaction with passive or aggressive wildlife: bears, wolves, other carnivores, rodents, wood ticks, birds, snakes, insects or other wild or domestic animals.
- **TOOLS:** The potential of any injury from the use or misuse of tools: hammers, wrenches, chainsaws, hand saws, electric saws, screw drivers, chisels, grinder, welders, soldering irons, torches or other hand held motorized or hydraulic powered tools.
- **HAZARDS OF TRAVEL:** Injury resulting from the operation of a motor vehicle on a paved or unpaved roadway, or injury resulting from the operation of a boat or vessel during water travel.
- **EQUIPMENT:** Injury resulting from the use of free weights, weight machines, tread mills, stair climbers, rowing machines, cameras, cables, tripods, lights, microphones, sandbags, snow shoes, kayaks, bow and arrows, sticks, pucks, skates, racquets and balls.
- **PUBLIC HEALTH EXPOSURES:** Injury or illness resulting from epidemic, pandemic (COVID-19), outbreaks of infectious disease or any other public health crisis, including quarantine or other restrictions.
- **OTHER HAZARDS:** Injury due to fall, flood, immersion in cold water causing hypothermia, shock or drowning, aircraft propellers, helicopter blades, falling material, unsecured equipment, electrocution, running engines, theft of property or the possibility that I or others do not heed safety instructions or restrictions given to the group.

I understand that the BCIT's Code of Conduct applies during this activity. I will be responsible for any costs caused by my failure to abide by the Code of Conduct, including any costs to send me home.

I further certify that my current physical condition will not present any undue health and/or injury risks to myself or others while taking part in this activity.

**ACCIDENTS CAN BE THE RESULT OF THE NATURE OF THE ACTIVITY AND CAN OCCUR WITH OR WITHOUT ANY FAULT ON EITHER THE PART OF THE STUDENT, OR BCIT OR ITS EMPLOYEES OR AGENTS, OR THE FACILITY WHERE THE ACTIVITY IS TAKING PLACE. BY PARTICIPATING IN THIS ACTIVITY, YOU ARE ACCEPTING THE RISK OF AN ACCIDENT OCCURRING, AND AGREE THAT THIS ACTIVITY, AS DESCRIBED ABOVE, IS SUITABLE FOR YOU.**

In signing this Informed Consent and Assumption of Risk, I am not relying on any oral or written representation or statements made by BCIT and its servants, agents, employees, or authorized volunteers, to induce me to participate in the activity, other than those set out in this Informed Consent and Assumption of Risk.

I am 19 years of age or more and have read and understand the terms of this informed consent and assumption of risk, and understand that it is binding upon me, my heirs, executors and administrators.

(All of the foregoing collectively, the "Consents and Assumptions of Risk")

Executed at BCIT- Burnaby Campus, British Columbia on April 10, 2025.

<b>PARTICIPANT/RELEASOR</b>	<b>WITNESS</b>
Signature	Signature
Print Name	Phone Number
Email	

If the Participant is under the age of 19 years, the Participant's Parent or Legal Guardian, by executing this form below, (the "Parent or Guardian") represents and warrants that the Parent or Guardian is the Parent or Legal Guardian of the Participant, has the legal authority to provide all Consents and Assumptions of Risk on behalf of the Participant, and does provide such Consents and Assumptions of Risk for both the Parent or Guardian, and on the Participant's behalf.

<b>PARENT OR GUARDIAN</b>	<b>WITNESS</b>
Signature	Signature
Print Name	Phone Number
Email	