

Colonial School District Florida Senior Trip Permission Form

RE: _____ Student Name

This permission form, authoring the above student to participate in a six day trip, has been signed only after understanding and considering the following:

1. **Trip Planned:** Orlando, Florida, Disney and Universal Attractions
2. **Purpose of Trip:** Education, class interaction
3. **Supervisor:** Trip Coordinator - Mr. Bretz and chaperones to equal 1 adult per 15 students
4. **Transportation:** Airline and Motor Coach
5. **Travel Dates/Times:** **Depart:** 1:45 p.m Wednesday, April 3, 2019. **Return:** 9:30 p.m. Monday, April 8, 2019
6. **Requirements:** See Contract
7. **Expectations and Instruction:** I understand the above referenced student is to do exactly what he or she is instructed to do by the supervisors. I have advised the student of this expectation.
8. **Insurance:** I understand that although the the Board of School Directors of the Colonial School District does carry liability insurance, it does not carry any insurance to cover medical expenses for injury to the above referenced student during the trip for which the school district is not liable. I represent that the student has insurance, either through the School District's Insurance Program or through my own carrier that covers any possible injury that should occur during the trip.
9. **Request:** I request that the above-referenced student be allowed to participate in the trip planned and described above and specifically consent to his or her participation.
10. **Emergency:** If any emergency procedures or treatments are required during the trip, I consent to the trip supervisor or supervisors taking, arranging for or consenting to the procedures or treatment in his, her or their discretion.
11. **Release and Indemnity Agreement:** I release and agree to indemnity, hold harmless or reimburse the Board of School Directors of the Colonial School District, the individual members of the Board, the Board's agents, employees representatives and faculty members, including the faculty member or members who first recommended the trip as having educational advantages, as well as the trip supervisors, from and against, any claim which I, any other guardian, any sibling, the student or any person firm or corporation may have or claim to have, known or unknown, directly or indirectly, for any losses, damages, or injuries arising out of during or in connection with the student's participation in the trip described herein or the rendering or emergency medical procedures or treatment, if any, during such trip.
12. **Applicable Only When Privately-Owned Transportation to be Used:** I/we are aware of and have no objection to the fact that my/our son/daughter will be in transported by privately-owned automobiles driven either by parents of students. I/we understand that the driver and/or owner of the automobile used on the trip will be primarily responsible for any injuries incurred on the trip.