

Parent/Guardian Extended Field Trip Permission, Waiver and Medical Authorization

FORM F

PALO ALTO UNIFIED SCHOOL DISTRICT • 25 Churchill Avenue • Palo Alto, CA 94306

| Sponsoring Staff Member(s) Daljeet Gill, Jacqueline Selfridge, W | /arren Collie School Site Henry M. Gunn High School | | | | |
|---|--|--|--|--|--|
| Dates of Trip_March 3-6, 2016 Trip E | Destination500 Hotel Circle North, San Diego, CA | | | | |
| Departure Time5:00AM Re | eturn Time 10:00PM | | | | |
| | | | | | |
| Student's Name (print) has my permiss | has my permission to participate in this extended field trip. Grade | | | | |
| Health Needs: Parent Guardian to <i>INITIAL</i> as appropriate. | | | | | |
| In the event I cannot be reached, I authorize the person in charge to obtain the necessary medical aid from a licensed physician at my own expense, understanding that certain expenses may be covered by the School District's Student Accident coverage. Yes No (If no - explain on the back of this form.) | | | | | |
| My student will need to take the following medication(s): | | | | | |
| for the following diagnosed health condition(s): | | | | | |
| Medical/physician authorization is required before a student may take any medication, including nonprescription drugs. If applicable, the <u>Medication Required for Overnight Field Trip</u> form is attached. | | | | | |
| My student has <u>no</u> special health needs the staff should be aware of and no medication is required on the field trip. | | | | | |
| I fully understand that participants are to abide by all rules and regulations governing conduct during this field trip. In the event that a participant must return home due to disciplinary action, all expenses shall be billed to the parent/guardian. There shall be no refunds or credits granted for unused portions of the program. | | | | | |
| All expenses for health treatments/procedures are the responsibility of the parent/guardian. | | | | | |
| As stated in California Education Code Section 35330, I understand that I hold the Palo Alto Unified School District, its officers, agents and employees, harmless from any and all liability or claims, which may arise out of or in connection with my child's participation in this activity. | | | | | |
| Parent/Guardian's Name (print) | Parent/Guardian's Signature | | | | |
| Address | | | | | |
| Home Phone | Work / Cell Phone | | | | |
| Student's Signature | Date | | | | |
| DI EASE RETURN THIS FORM TO THE SPONSORING STAFF PERSON AT THE SCHOOL by | | | | | |



| Sponsoring | Staff Member Warren Collie | ır | School | Henry M. Gunn High School | | |
|-------------------|---|---|---------------------------------|---------------------------------|--|--|
| Dates of Trip | March 3-6, 2016 | Destination_ | 500 Hotel Circle North, Sa | an Diego, CA 92108 | | |
| | • | I that all concerned realize that | some standards of conduct a | nd behavior must be agreed upon | | |
| | rdians are requested to go staff member before the trip. | over the following items wi | th their student and then | return the signed form to the | | |
| 1. | DRESS: Proper dress for tra | avel is required as described by | the trip leader. | | | |
| 2. dar | | Students must be in their assigned rooms. Hours, lights out, and quiet must be observed. Any lodging incurred by "horseplay" or otherwise is the responsibility of the student/parents/guardians. | | | | |
| 3. | SIDE TRIPS: Not permitted | without checking with leaders. | No one goes anywhere alor | ne. | | |
| 4. | TOBACCO: There is absolu | tely no use of tobacco in any f | orm. | | | |
| dise | ALCOHOL / DRUGS: Agreement to not possess, use, furnish, smoke, or otherwise ingest illegal substances or lcohol , which is a mandatory referral to the Principal of the school site. Infractions will be dealt with by normal school sciplinary measures, as well as the possibility of being sent home immediately. Local law enforcement will be used if deemed ecessary. | | | | | |
| 6. | PROMPTNESS: A trip is on | ly as fast as its slowest member | rs. Attention to schedule is pa | aramount. | | |
| 7. | BELONGINGS: Students sh | ould have the proper clothing a | nd equipment for safety / plea | asure / comfort. | | |
| 8. | ATTENTION: Whenever ora | Il instructions or directions are g | iven, all participants must pay | y 100% attention. | | |
| 9. into | COMMON COURTESIES: 1 contact with during the trip. | These are expected by students | toward fellow students, chap | erones, and all people you come | | |
| 10. | ROOM / BUS / CAR: Clean- | up of vehicles and rooms is the | expected norm. | | | |
| 11. | | | | | | |
| chaperone v | ria public transportation, at the Insubordination or flagrant vio | ne parents'/guardians' expens olations of field trip rules. o, alcohol, marijuana, or any otho | e for both student and chap | | | |
| Print Stu | dent Name | | Grade | | | |
| I have r | eviewed the above with my p | arent/guardian and agree with | n the provisions and expect | ations herein. | | |
| Student Signature | | Date | | | | |
| I have r | eviewed the above with my s | tudent and agree with the pro | visions and expectations h | erein. | | |
| Print Par | ent/Guardian Name | Parent/Guardiar | n Signature | Date | | |