



FIELD TRIP PERMISSION FORM AND WAIVER

Your child has received charter school approval to participate in a field trip. Under the California Educational Code and Board Policy, teachers and support staff may take students on field trips to enrich and complement their educational experience. Such trips are always under the supervision of at least one teacher and/or school administrator, and all precautions are taken to ensure each student's welfare.

Student Name: _____ Trip Advisor: Natasha Morse

Field Trip Date: Saturday, March 5th 2016 Departure Time: Starts at 9:30am Return Time: Ends at 12:30pm

Trip Location and Address:
W. Imperial Highway + Loma Vista St.
El Segundo, CA (Meet across from the apartments at 604 W. Imperial Ave)

Administrative Approval: [Signature]

Items Student Should Bring :
Closed toed shoes, sunscreen, hat, water.
(Tools and gardening gloves will be provided)

Transportation:
Students are responsible for their own transportation to and from the event.

Current Course Standing Teachers of all classes missed must sign acknowledging that the student will miss class on the indicated day(s) and write any notes/concerns/requirements.

Per.	Course	Teacher's Initials	Notes
1			
2			
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Adv			

WAIVER OF CLAIM: I understand that AB 766 provides that all persons making a field trip or excursion shall be deemed to have waived all claims against the Charter School for injury, illness or death occurring during or by reason of the field trip or excursion. I therefore acknowledge that as a condition of my son/daughter/ward participating in said activity, I hold harmless and waive any and all claims against the Charter School and the CCSA JPA (and their officers, employees, agents), including, but not limited to, claims arising out of any negligence of any officers or employees of the Charter School, for any injury, accident, illness, or death, or any loss or damage to personal property occurring during or by reason of the participation in said activity.

1. I understand this field trip is optional and attendance by my child is not required and that an alternative activity at Charter School will be provided if I do not give permission for my child to participate.
2. I understand that all students going on this trip will be responsible in conduct to the bus driver(s), to teachers, and, if applicable, adult sponsors at all times.
3. I understand that all field trips begin and end at the School and that all students are required to go and return from this event on the transportation provided, unless prior arrangements have been made and agreed to in writing by the principal, site administrator, or teacher.

AUTHORIZATION TO TREAT MINOR: In the event that I, or other parent/guardian, cannot be reached in an emergency, I hereby give permission to the school staff to secure proper treatment for my child. I do hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon or dentist and performed by or under the supervision of the medical staff of the hospital or facility furnishing medical or dental services.

PARENT/LEGAL GUARDIAN SECTION: MUST BE COMPLETED

Name of Student : _____

Name(s) of Parent(s)/Legal Guardian(s): _____

Phone Numbers: _____

Emergency Contact Person: _____ Phone: _____

Physician's Name: _____ Phone: _____

Health Insurance Carrier: _____ Policy Number: _____ Phone: _____

Student's Critical Medical Needs/Allergies/Conditions: *(if none, please check here →)*

I understand that all students participating in this trip will be expected to adhere to all of the rules & expectations of student conduct outlined in the Da Vinci Handbook. I agree to abide by these policies, and I understand that violation of these rules may result in my being sent home at my parents' expense and possible removal from Da Vinci Science.

Student's Name: _____ Signature: _____ Date: _____

I acknowledge that I have carefully read this document and understand the information therein. I agree to each of the terms and acknowledgments above, and agree to permit my child to participate in the trip described above.

Parent/Guardian Name: _____ Signature: _____ Date: _____