



STUDENT FIELD TRIP AUTHORIZATION

No student will be permitted on the Field Trip unless this completed and signed Authorization is submitted to the Supervising Teacher, Sponsor, or School Main Office at least 48 hours prior to Field Trip.
Verbal Authorizations, or Authorizations not on this form, cannot be accepted.

Student Name:	Address:
Grade:	DOB:
School:	Home Telephone:
Emergency Contact & Telephone No.:	
Field Trip Destination:	
Date of Trip:	
Expected Departure Time:	
Expected Return Time:	
Method of Transportation:	
Supervising Teacher/Sponsor:	
Medical Conditions/Medications:	

By signing below, I acknowledge and agree as follows:

1. Participation in this Field Trip is voluntary and is a privilege. I understand that the student has the right and ability to remain at school instead of participating in the Field Trip. I request that the Student be allowed to participate in the Field Trip, under the supervision of the Supervising Teacher/Sponsor and/or adult chaperones, with transportation to be provided in the described manner (which may include transportation in non-District owned/operated vehicles).

2. California Education Code Section 35330 states that: "All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion." I understand and agree that I cannot hold the District, its officers, agents, or employees liable for any claim arising out of, or which is in some manner connected with, the Student's participation in this Field Trip. [Adults participating in out-of-state Field Trips must also sign a statement waiving such claims.]

3. The Supervising Teacher or Sponsor will discuss Field Trip rules and safety requirements with students and adult chaperones prior to the Field Trip, which may include dangerous or hazardous conditions or circumstances exposing the Student to potential harm or injury, potentially including death. Students are required to obey all rules and safety requirements of the Field Trip, as well as Codes of Conduct and general standards for respect of persons and property and good behavior. I understand and agree that failure of the Student to follow Field Trip rules or safety requirements may result in the Student being sent home, at my expense, and that the Student may be barred as a result from future Field Trips.

4. Emergency medical information regarding the Student is on file with the District and is current. (Provide updated information before the trip, if necessary) If an injury or medical emergency occurs during the Field Trip, a Supervising Teacher, Sponsor or chaperone has my express permission to administrator or to authorize the administration of urgent or emergency care, including the transportation of the Student to an urgent care or emergency care provider. In such circumstances, notice to me and/or the Emergency Contact of the injury or medical emergency may be delayed. Therefore, any urgent or emergency care provider has my express authority to conduct diagnostic or anesthetic procedures, and/or to provide medical care or treatment (including surgery), as they may deem reasonable or necessary under all existing circumstances. All costs and expenses associated with such care are solely my responsibility.

Parent/Guardian Printed Name	Signature	Date
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Date Received by School:	Received by:
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STUDENT CONTRACT

Yes, I will attend the Woodbridge High School Cross Country Classic race and Disneyland trip! I understand that an initial payment of \$150 will be due on July 15, with an additional \$150 due on August 17. * These fees do not include food (\$50-75) or gas for the parent driver. We look forward to an exciting trip!

As a participant on this trip and a representative of Rio Americano High School, you will be expected to follow school, Disneyland, and hotel rules, including abstaining from using or selling any controlled substances, alcoholic beverages, or tobacco products. In addition, no student may be in a hotel room alone with someone of the opposite gender at any time. Not following these rules will result in school and district disciplinary action. Also, for safety purposes, Rio Americano students are expected to be with at least one other person from our school group (either another Rio Americano student or adult chaperone) when off hotel premises.

Runner's name (please print) _____

Runner's signature _____

Parent or guardian name (please print) _____

Parent or guardian signature _____

*Payment can be made by check, payable to RAAB and given to Coach Anton, or via credit card through the Rio Cross Country and Track and Field Web page. Please note that payment by credit card will incur a 3.1% service charge. **The initial student payment of \$150 is non-refundable, since it will go towards hotel costs, which we must pay well in advance.** So, please only submit payment if you are certain that you will attend. Direct questions to the coaches or Jennifer Taylor-Karperos at (916) 567-1927 or karperos@sbcglobal.net.

This form is due, along with your initial payment, by July 15.