

LEARNING LANDSCAPES - 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 or School Main Office at least 48 hours prior to the Field Trip. Verbal Authorizations or Authorizations not on this form cannot be accepted.

Student Name:		Address:	
Grade:		DOB:	
School:		Parent/Guardian Telephone:	
Emergency Contact:		Emergency Contact Phone:	
Field Trip Destination:		<u>Smithneck Creek/Chadwick Easement/Sierra Valley Learning Landscape</u>	
Date of Trip:		<u>Periodically throughout the school year</u>	
Expected Departure Time:			
Expected Return Time:			
Method of Transportation:		<u>Walking to Creek located across from Loyalton Elementary School</u>	
Supervising Teacher:			
<i>Alert! Student Medical Condition:</i>			
<i>Alert! Student Medications:</i>			

By signing below, the Parent or Guardian of the Student planning to participate in the above identified Field Trip states his/her legal right to authorize said Field Trip and acknowledges and agrees 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 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 Ed Code §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 and/or my participation in this Field Trip.
3. The Supervising Teacher 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 or chaperone has my express permission to administer 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.
5. I hereby "absolve, release, and hold harmless" the property owner (Pantufra Properties, LLC) and tenant (Einen Grandi).

 Parent/Guardian PRINTED Name

 Parent/Guardian SIGNATURE

 Date