



Field Trip and Emergency Consent Form

Building: _____ Group / Department: _____

Field Trip Destination / Description : _____

Departure Date: _____ Departure Time: _____ Return Time: _____

Transportation Arrangements: School Bus Charter Bus Other _____

Learning Objectives For Field Trip: _____

Trip Cost per Student: \$ _____

Name of Lead Chaperone: _____ Contact Number: _____

Return
to: _____ by: _____

Field Trip Name _____

Student Name _____ Grade _____ DOB _____

Parent/Guardian Phone Number: Mother _____ Father _____

Contact if Parent/Guardian can not be reached: Name _____ Phone # _____

Any medical concerns or allergies? () YES () NO If yes, please explain _____

Will medication be required during the trip? () YES () NO

If yes, please describe and indicate if self-medicated or not self-medicated: _____

If medication is needed on the field trip, a doctor's note and written parental permission must be on file in the health office. Self directed students must carry medicine in the original container and must have permission to self medicate. Non-self directed students will need to have a parent or nurse accompany them on the field trip to administer the medication.

I, the parent/guardian of _____, grant permission for Shenendehowa School District and its employees full authority to take whatever action they deem necessary regarding my child's health and safety in the event I can not be reached or in a situation where time is of the essence; and fully release the Shenendehowa School District and its employees from any liability in connection with those decisions. I grant permission for emergency treatment by a rescue squad, private physician and/or hospital or emergency health care staff if needed. Any such action will be taken in the best interest of my child and will be reported to me as soon as possible.

My signature gives permission for my child to go on the _____ field trip. I also give permission to Shenendehowa staff to act on my behalf in the event of a medical emergency and to authorize medical action as necessary.

Parent Signature

Date



STUDENT NAME _____

Terms and Conditions For Overnight/Domestic Study Trips

Responsibilities of Shenendehowa Students Participating in Overnight/Domestic Study Trips

Overnight travel with a school group is an earned privilege. Students are expected to demonstrate responsibility, mature behavior, good citizenship and cooperative attitude in order to be eligible to participate in such programs.

1. Each student is expected to behave in such a way as to be a goodwill representative of his/her family, school, country and to act out of awareness and respect for all laws and moral behavior.
2. Each student is expected to participate in **all** program activities.
3. When students are granted short opportunities for shopping or exploring a limited area, they are expected to adhere to all behavioral expectations of the Shenendehowa High School Code of Conduct. When traveling with a tour, students should travel in **groups no smaller than 3 persons** and should meet the chaperones and the rest of the group at the appointed time. Punctuality is essential!
4. Each student is expected to be in the hotel and in his/her assigned room by the curfew time set by the chaperones.
5. Each student must adhere to the Shenendehowa High School Code of Conduct throughout the trip including exchange programs with host families. **Therefore, the use of illicit drugs, alcohol and tobacco is prohibited.** Chaperones should be made aware of any prescription medications that will be transported and taken during the trip.
6. Students may not operate a motorized vehicle while traveling.
7. Any student in the chaperones' charge whose attitude and/or behavior is such that he or she is a problem to the group morale, who acts independently of the chaperones' admonitions, who, in the judgment of the chaperones, is considered to be behaving in such a way as to warrant censure, shall be sent home before the end of the trip **at the expense of his/her parents**, after consultation with the high school principal or his designee. The lead chaperone will contact the parent(s)/legal guardian(s) immediately to inform them of the incident(s). The student will immediately be sent home at the parent's/legal guardian's expense and will have disciplinary consequences upon return to school.
8. If the District determines a trip will be cancelled, the Superintendent and/or designee will convey the decision to the Lead Chaperone who will notify affected parents/legal/guardians and students. Attempts shall be made to minimize the potential loss of funds already paid or deposited. The District shall not be liable for the repayment of any funds lost due to trip cancellations.

We have read the above guidelines and agree to abide by these regulations to ensure the safety of each individual and the success of the travel program. In addition, we have received and read the Board of Education Policy regarding overnight/domestic travel and agree to comply with the school's policies (# 8460 and #8461).

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Reviewed: Oct. 3, 2018